TRANSWESTERN PIPELINE COMPANY

REGION VI

NEW MEXICO AND TEXAS

VOLUME 3

ATTACHMENT 6.2

Waste Activity Registration Notices

TEXAS () EASTERN Transmission Corporation

WILLARD T. YOUNG
MANAGER
ENVIRONMENTAL CONTROL
ENGINEERING SERVICES DIVISION

November 17, 1980 OUR REF: 388-80

EPA Region VI Attention: 6 AEP 1201 Elm Street First International Building Dallas, TX 75270

Gentlemen:

Attached please find RCRA permit application for the following facilities:

Puckett Gas Sweetening Plant Keystone Gas Sweetening Plant Halley Gas Sweetening Plant

These applications should fulfill all requirements for their respective classifications under RCRA. Should there be any deficiencies or questions, please notify Willard T. Young, Manager, Environmental Protection Department (713) 759-5355.

Yery truly yours,

Willard Te Young Manager, Environmental Protection

JRS/jc Attachments

bcc: w/attachment:

Stirling Dougherty

J. C. Elmore
Paul Fisher
G. O. Moe
Gerald Walker

1201838

Jile R4.0502 D

Please print octype in the unshaded areas of fill-in ereas are speced for elite type, i.e.,	13 rectors/inch).			CYION ASSESS (-		Approved OMB No.	58-RC	175	
FORM O EDA	GENER					I.D. NUMBER	4	9734S	
1 SEPA			Permits Patructions	rogrem before starting.)	FI	X D 0 9 5 4	3.7	2 1	6
LABELITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY V. MAILING ADDRESS VI. FACILITY VI. LOCATION	PLEASE PLACE	LA	BEL IN	THIS SPACE	it in ation throug appropriate proper compliters must items the i	preprinted label has a the designated spaces. Carefully; if any of igh it and enter the priate fill—in area be reprinted data is absorbed the label space if the label space if it in area(s) beliete and correct, you if it is completed regarding the completed regarding to the legal as and for the legal as a space if and space if it is a space if	Revieus it is in correct in it is in correct in it is in correct in it is in it in it is in i	provide with the large state of	e info let, ci ta in if any ne to ormat it in labe compi desc Refer desc
111111111		7			\ 1	this data is collected.	755404		
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through questions, you must submit this form a if the supplemental form is attached. If is excluded from permit requirements; as	t J to determine wheth and the supplemental for you answer "no" to e section C of the inst	ner yo orm li sech q ructio	u need to sted in the uestion, y ns. See als	e parenthesis following the ou need not submit any of o, Section D of the instruc	ation forms to question. M f these forms tions for def	ark "X" in the box in You may answer "no initions of bold—faces	the the of if y	our ac L MAR	olumn ctivity
		#0	ATTACHED	8. Does or will this fac	IC QUESTIC		743	=0	444
A. Is this facility a publicly owned which results in a discharge to we (FORM 2A)	ters of the U.S.?	X	- 14	include a concentre equatic animal prod discharge to waters o	ted enimal fuction facility fithe U.S.? (f	seding operation or ry which results in a FORM 28)		χ	
C. Is this a facility which currently res to waters of the U.S. other than t		X			hich will res	than those described ult in a discharge to		X	
A or B above? (FORM 2C) E. Does or will this facility treat, sto hazardous wastes? (FORM 3)	X	-	X		inject at this elow the low quarter mil	vermost stratum con- le of the well bors,		X	
G. Do you or will you inject at this fact water or other fluids which are brown in connection with conventional oil duction, inject fluids used for enha oil or natural gas, or inject fluids for hydrocarbons? (FORM 4)	lity any produced ight to the surface or natural gas pro- inced recovery of r storage of liquid	X		process, solution mi	es mining of ning of mine	facility fluids for spe- sulfur by the Frasch trals, in situ combus- f geothermal energy?		X	
I. Is this facility a proposed stationar one of the 28 industrial categories structions and which will potential per year of any air pollutant reg Clean Air Act and may affect or attainment area? (FORM 5)	y source which is illisted in the in- ly emit 100 tons ulated under the be located in an	X		instructions and whi	industrial ca ch will poter ollutant regul	nary source which is stegories listed in the stially emit 250 tons ated under the Clean sted in an attainment		X	
III. NAME OF FACILITY									
1 SKIP PUCKETT PL	ANT	<u>.</u>				- 			
V. FACILITY CONTACT									
	LA TITLE (last, first, d	ritle,	, 		H. PHONE	(area code & no.)	1		•
	RD MGR,	t N	y , p	ROTECT	1.3 7	<u>.5.9 5.3.5.5</u>			
V. FACILITY MAILING ADDRESS	STREET OR P.O. BOX								
B 0 X 2 5 2 1				4			- ;		
2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	OR TOWN			C.STATE D. ZIP	CODE				
HOUSTON				T.X 7.7.0	0.1			:. 	
VI. FACILITY LOCATION	NO. OR OTHER SPEC				To Belling the				
5 S E C T I O N 3 4 8	3.5 B L	1	1 1 1	2.6		120	15	3	
	OR TOWN			T		COUNTY CODE			
6				ΤX	C00€ .	(if known)			
EPA Form 3510-1 (6-80)				4 11 17		11 M			

	ere spaced for elite type,								wed OMB No. 1			
FORM	≎EPA	GEN	ERA	LI		CTION AGENCY IATION			0 0 0 7 2	1	7 7	T.A
GENERAL	CITEMS					before starting.)		1	NERAL INSTR			10 11
$r \rightarrow r$	NUMBER	/////	//	//	///	////	///	If a preprin	ited tabel has b signated space.	een p	rovida	
IL FACIL	TY NAME	////	//	/	///	/////		ation carefu	ily; if any of it	i is in	COTTE	ict, erc
4	//// //	/////	//	/	///	/////	///	the preprint	fili—in eree bel ed data is abse	nt <i>(th</i> i		to to
n. MYIFIN YACIFI	TY IÇ ADDRESS	PLEASE PLA	ICE	LA	BEL IN	THIS SPACE	///	that should	label space lis appear), pleass	prov	ride i	it in 1
++-	444/		1	Γ,			///	complete ar	in area <i>(s)</i> belo id correct, you	need	not (compl
FACIL	:7//V/	/////	/)	//	//,	////	///	must be co	i, V, and VI (Impleted regard	less).	Com	plete
AI FOCY	LION	/////	//	//	///	////	///	the instruc	tabel has been tions for deta for the legal as	iled l	tem	descr
111		7///	7)	7	77,	////	777	which this d	eta is collected.			ns un
	ANT CHARACTERISTIC									-		
questions, if the supp	FIONS: Complete A thr you must submit this for lemental form is attached from permit requirement	rm and the supplement d. If you answer "no"	tal for 'to sa	m li ich q	sted in the vestion, y	parenthesis follow ou need not submit	ing the que any of the	stion. Mark ") se forms. You	(" in the box in may answer "no	the th	ird ea	olumn
•	SPECIPIC QUESTIO	DNS	VES	MAR	K .X.	marta in a	PECIFIC C	EVESTIONS	we was	YES	MAR	K X
	facility a publicly own					B. Does or will the			or proposed)		Х	
(FORM	results in a discharge to 2A)	waters of the U.S.?		X			productio	on facility whi	ch results in a			
	Facility which currently		19	12 X	- 10	D. Is this a propo	sed facility	(Other than 1		-	ν 20	21
	bove? (FORM 2C)		80	ā	M	weters of the L	S.7 (FOR	M 2D)		89	8	37
E. Does o	r will this facility treat, us wastes? (FORM 3)	, store, or dispose of	Х	20	χ	municipal effi	uent below one qui	the lowermonerter mile of	t stratum con-	30	X	22
	or will you inject at this other fluids which are i					H. Do you or wil	you injec	t at this facility	fluids for spe-			
duction oil or n	ection with conventional , inject fluids used for atural gas, or inject fluid	enhanced recovery of		X		process, soluti	on mining	of minerals, i	n situ combus- hermal energy?		Х	
. is this	arbons? (FORM 4) facility a proposed static the 28 industrial category	onery source which is	- 84	20	W	J. Is this facility			ource which is	37	34	30
structio	ins and which will pote ar of any air poliutant	ntially emit 100 tons		X		instructions ar	ed which v	vill potentially	emit 250 tons		Х	
Clean /	Air Act and may affect ent area? (FORM 5)		40	41	42	Air Act and m	sy affect (or be located in	an attainment	49	••	- 43
		The second second section of the second section sectio	عافعو	بدد	1		-	The Participant		والمعوي	- 15	
1 SKIP K	EYSTONE	PLANT	-									
	Y CONTACT	and the state of the state of	45	10		PARTY OF THE REAL PROPERTY.		والمنطقة والوا	- P			
<u> </u>		AME & TITLE (last, fir	rat, &	title)		, ,*	PHONE (area	code & no.)	4		
2 Y O U	NG, WILL	ARD MGR	<u>, E</u>	N	<u>V . P</u>	ROTECT	7.1	3 7 5 9	5 3 5 5	1		
	Y MAILING ADDRESS			9 (**)	-	THE WAR STATE					0.1	7. T
	D 0 V 0 E 0	A. STREET OR P.O.	BOX	1			- 					
3 P 0	B 0 X 2 5 2	1		٠.			48					
التارية		ITY OR TOWN	.	1	<u> </u>	C.STATE	D. ZIP COC	PE				
4 H O U	STON						7.0.0	1				
VI. FACILI1	Y LOCATION			Dr. A		And the second	61.4. F. F. SH	· · · · · · · · · · · · · · · · · · ·	And in the	N.	7.45	
ا ا	A. STREET, ROL		PECI	FIC	DENTIF	ER	, 		120	1.8		
	TION 21	, B L O C K	<u>.c</u>	_7_	7	<u> </u>	•••	•. •	- ~ ·	+ 0	ΛŢ	
18 18	B. CO	UNTY NAME		1	1 1 1	$\overline{}$	_ 					•
WINK	LER											
WINK		TTY OR TOWN		<u></u>		D.STATE	E. ZIP COI	F. COU	NTY CODE			

	,
VIL SIC CODES (4-digit, in order of priority)	
	8. SECOND
(medit)	
714,36.2 NATURAL GAS SWEETENING	
C. THIRD	D. FOURTH
E (specify)	
7	
VIIL OPERATOR INFORMATION	the state of the state of the state of the state of
A. NAME	B. Is the name listed
TRANSWESTERN PIPELINE COMPANY	owner?
	YES DNO
70 10 10 10 10 10 10 10 10 10 10 10 10 10	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) F = FEDERAL M = PUBLIC (other than federal or state) (specify)	D. PHONE (ares code & na.)
P P PRIVATE O = OTHER (specify)	A 713 759 5355
E. STREET OR P.O. BOX	115 60 - 10 to - 11 m - m
PO BOX 2521	
PU DUX 2321	
F. CITY OR TOWN G.STATE M. ZIP CODE	IX INDIAN LAND
HOUSTON TX 7 7 0 0 1	Is the facility located on Indian lands?
	YES NO
X EXISTING ENVIRONMENTAL PERMITS	The second second second second second
A. NPDES (Discharges to Surface Water) D. PSD (Air Emissions from Proposed Sources)	
9 N	
St. Liv. 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 17 10 10	
CIVIL THE THE THE THE TENED OF	FILE NO NOT A PERMIT
	AS AIR CONTROL BOARD
C. RCRA (Hezerdous Westes)	S AIR CONTROL BUARD
COLUMN TO THE CO	(D)
9 1 9 1 1 1 1 1 1 1	
XI MAP	The second second second second second
Assoch to this application a topographic map of the area extending to at least one mile beyond pro	perty bounderies. The map must show
the outline of the facility, the location of each of its existing and proposed intake and discharge treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include	structures, each of its hazardous waste
waster bodies in the map area. See instructions for precise requirements.	se an springs, rivers and other surrace
XIL NATURE OF BUSINESS (provide a brief description)	
The first of decired provided that the popular state of the state of t	
NATURAL GAS SWEETENING PLANT	
•	
	•
	•
المراجع المراجع المراجع المحمد المراجع المحمد المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع ا المراجع المراجع المراجع المحمد المراجع المحمد المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع ا	
· · · · · · · · · · · · · · · · · · ·	
XIII. CERTIFICATION (see Instructions)	
certify under penalty of law that I have personally examined and am familiar with the information attachments and that, based on my inquiry of those persons immediately responsible for obtain	on submitted in this application and all
§ application, I believe that the information is true, accurate and complete, I am aware that there	owny use mormation contained in the are significant penalties for submitting
false information, including the possibility of fine and imprisonment.	12 7 12 7 12 7 12 7 12 7 13 7 14 5 2
A. HAME & OFFICIAL TITLE (Type or print)	C. DATE SIGNED
ROLAND E. MOORE, VICE PRESIDENT &	1. 1. 10
CHIFF ENGINEER A Same	one 11/19/80
COMMENTS FOR OFFICIAL USE ONLY	
·養衛集 - Triangle Control of the State of the	
C	

8				spaced for elite type	areas onl e, i.e., 12	2 cr								نجس		MB No. 158-580004	
7	RM 1	Γ	n	PDA	HAZ	ARDO	VIRON US W	AST	E	PROPER	MIT	DP	AGEN	AT	I. EPA I.D. NU	MBER TO THE	
l		1	7			is inform	Cons	olidət	d A	emia	Pro	gram	٠		FIT X D 0 0	0 7 2 9 0 3 8	8
RC OI	_	FF	ICIA	L USE ONLY										_	A PART OF THE PARTY		
APP		AT	ON	DATE RECEIVED											MMENTS		
	T	T														• .	
<u> </u>	: TD	<u></u>	믔	PEVISED APPI	ICATIO	N and	A COLAY	-kr	رياده	S. 1	والمراجعة	7.4.5	160	e v	and the second little of the latest	Digital Residence of the	
Place	e an	"X	" in 1	he appropriate box	in A or I	B below	(mark o	ne box	c on	ly) to	indi	cate w	hethe	thi	is is the first application you are su	bmitting for your facil	lity or
				on. If this is your fi r in Item I above.	rst applic	cation an	d you a	iready	kno	w yo	ur fæ	cility'	EPA	I.D.	. Number, or if this is a revised app	plication, enter your fac	cility"
A. I	FIR			LICATION (place			-			-					TO MEN TARM	TY (Complete item beig	ou i
	, F	1.1	LXIS		Complete	é item be	low.)		UT.	20 y 6			-A		म	FOR NEW FACI	ルイナル
8	_	Ϊö	1	OPE	EXISTII RATION the boses	BEGAN	OR TH									DAY (yr., mo., & day)	OPEI
ᇍ	_ 7	74	1.5	PPLICATION (. 2		omple	te I	tem I	abov	 e)	<u></u> ,	٠. ٠٠	77 76 79 76 7	EXPECTED TO	3601
				LITY HAS INTER					77.	7. F 7.					2. FACILITY H	AS A RCRA PERMIT	
III.	PR	oc	ESS	ES – CODES AN	D DESI	IGN ÇA	PACIT	IES	1	1		N.	(A)	Ç.	The state of the s		7.5.
															ch process to be used at the facilit will be used that is not included in		
C	lesc:	ribe	the p	rocess (including it	z design (capacity)	in the	tbace	DLOA A 2h	rided o	on th	e forn	a pro	7 ///	I-C).	n the list of codes below	M, UN
				SIGN CAPACITY		ch code	entered	in col	umr	A en	ter t	ye cat	ecity	of t	he process.	भूति का क	
	2. L	NI'	OF		each amo								e from	the	e list of unit measure codes below	that describes the unit	of
	П	1684	nue n	sed. Only the units	s of meas PRO-	•	are liste PRIAT				bę u	ed.	*		PRO- A	APPROPRIATE UNITS	OF
	ţ		PR (CESS	CESS	MEAS	JRE FO	R PR	DCE	SS				PR		MEASURE FOR PROCE	ESS
St	orag	e:				·		,				Trees	ment		AND THE RESERVE OF THE PARTY OF		
T/	NNA			(barrel, drum, etc.)	802	GALLO	NS OR I	LITER				TAN	-		LI.	LLONS PER DAY OR TERS PER DAY	
			ile Limi	POUNDMENT		CUBIC N CUBIC N GALLOI	SETER!	3 - 2	···				FACE Ner/		L	ALLONS PER DAY OR TERS PER DAY ONS PER HOUR OR	₹ .
	SDO :		-					2 .2-7.2							MI	ETRIC TONS PER HOL ALLONS PER HOUR C	
	JEC		N W	ELL COMPANIES OF THE STATE OF T	- D80 .	GALLOI ACRE-F would ed	EET (th	e volu	me	that		OTH	ER (L	ee f	or physical, chemical, TO4 G	ters per hour Allons per day or	₹
				المدادية والمعايد العدير بالردائح يهرين بمحمض		depth of HECTAI	ane foo	t) OR	١			proce	eses n	ot o	ecurring in tanks, adments or inciner-	TERS PER DAY	
				SAL -	D42	ACRES (GALLOI LITERS	NS PER	DAY			•	etore the s	Desc Pace p	rovi	e the processes in ided; Item III-C.)		i
SL	JRF	AC	E IM	POUNDMENT	Dás	GALLO			:5						,	•••	
					MEASL	JRE				•				ME	NIT OF ASURE	ME	NT O
				SURE	COD	<u>)E</u>	•			EASU R DAY					ODE UNIT OF MEAS	SUREC	ODE
•	TE	75		5	. L		TO	NS P	ER I	HOUF	١				D HECTARE-MET	rer	F
L	ALL	ON.	S PE	RS		j	. G/	TERS	NS P	PER H	OUF JR .	•		• •	E HECTARES		
1000		LE	FOR	COMPLETING IT	EM III (si	hown in	<i>line nun</i> ncinerat	n <i>ber</i> s or the	X-1	and 2	X-2 b	to 20	: A fa	cilit	ty has two storage tanks, one tank	can hold 200 gallons as	nd the
CI CI G.	er ce					7/A C	7	7	\	7	\	7	7	7	111111	77777	7
CI CI G	er ce					111	/ /	$\overline{7}$	7	$\overline{}$	7.	\	//	<u></u>	, , , , , , , , ,	1	' '
EX other	er ca			DUP		14 115			ı					_ 1			
EXX other	A.	PR					ACITY		-∤	FOE		E	A. PF		B. PROCESS DESIGN C		<u> </u>
E - U BER	A.	ES: OD	5 E	D U P			2. OF	UNIT	OF	FOR FFICI USE	IAL	빏	COE	S		2. UNIT OF MEA. OF	FOR
BER LOUGH	A.	ES:	E E	D U P B. PROCESS	DESIG		2. OF S	UNIT	7		AL	빏	CES	S iut	B. PROCESS DESIGN C	2. UNIT OF MEA- SURE	
LINE - C	A. C.	ES:	E ist	D U P B. PROCESS 1. AM (spec	DESIG		2. OF S (c	UNIT MEA URE enter ode)	7	FFIC	AL	LINE	CES COE (from	S E list e)	1. AMOUNT	2. UNIT OF MEA. SURE (enter C	FICI
E C C C B B B B B B B B B B B B B B B B	A. C.	ES:	Est	D U P B. PROCESS 1. AM (spec	DESIG		2. OF S (c	UNIT MEA URE enter ode)		FFIC	AL	빏	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
NUMBER - OF	A. Confred	O D	E ist	D U P B. PROCESS 1. AM (spec	OUNT cify)		2. OF S (c	UNIT MEA URE enter ode)		FFIC	AL	LINE	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
EXY OTHER TANK	A. C.	0	2 3	DUP B. PROCESS 1. AM (apec)	OUNT CITY)		2. OF S (c	UNIT MEAURE senter ode)		FFIC	AL	S CINE	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
EXY OTHER TANK	A. Confred	O D	2 3	DUP B. PROCESS 1. AM (spec	OUNT CITY)		2. OF S (c	UNIT MEA URE enter ode)		FFIC	AL	C LINE	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
EXY OTHER TANK	A. Confrai	0 0	2 3	DUP B. PROCESS 1. AM (aper) 600	OUNT CITY)	IN CAP	2. OF S (c	UNIT MEAURE senter ode)		FFIC	AL	S CINE	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
EX other Sun X-1	A. C.	0 0	2 3	DUP B. PROCESS 1. AM (aper) 600	OUNT Cify)	IN CAP	2. OF S (c	UNIT MEA URE enter ode)		FFIC	AL	5 6 7 8	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI
EXT SAUN NUMBER 1	A. Confession	0 0	2 3	DUP B. PROCESS 1. AM (aper) 600	OUNT Cify)	IN CAP	2. OF S (c	UNIT MEA URE enter ode)		FFIC	AL	S CLINE 5 6 7	CES COE (from abou	S E list e)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	FICI

ONTINUED FROM THE FRONT	F-
VII. SIC CODES (4-digit, in order of priority)	
A. PIRST CO. S. C.	B. SECOND
7 4 9 2 2 (specify) 7 A 9 2 2 (specify) 7 A 9 2 2 (specify)	
7 4 9 2 2 NATURAL GAS SWEETENING	
C. THIRD SECTION SECTI	B. FOURTH
(specify)	
7 10 · 10 13 14 · 10	
VIII. OPERATOR INFORMATION	
A. NAME	B. Is the name listed in Item VIII-A also the
BTRANSWESTERN PIPELINE COMPANY	cwner?
a fara kanka ka k	YES ONO
19 16 C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)	D. PHONE (area code & no.)
F = FEDERAL M = PUBLIC (other than federal or state) [(mecify)]	
S = STATE O = OTHER (specify)	A 713 759 5355
E. STREET OR P.O. BOX	111 14 - 10 110 - 10 120 - 100
P 0 B 0 X 2 5 2 1	
FO DOX 2321	
F. CITY OR TOWN G.STATE H. ZIP CODE	IX. INDIAN LAND
BH'0'U'S'T'0'N' TX 77001	Is the facility located on Indian lands?
	THES MO
19 10 40 41 42 67 • 91	
A. NPDES (Discharges to Surface Water) D. PSD (Air Emissions from Proposed Sources)	
9 N 9 P	
10 15 17 16 20 16 17 18 20 18 18 17 18 20 18 18 17 18 20 18 21 21 21 21 21 21 21 21 21 21 21 21 21	
STILL	(N) ETI E NO. NOT A DEBUTE
[a] [a] [b] [b] [a]	FILE NO NOT A PERMIT
C, RCRA (Hazardous Wastes) E. OTHER (specify)	AS AIR CONTROL BOARD
CITIL CONTROL	ify)
9 R	•
XI. MAP	
Attach to this application a topographic map of the area extending to at least one mile beyond prop	perty boundaries. The man must show
the outline of the facility, the location of each of its existing and proposed intake and discharge a	structures, each of its hazardous waste
treatment, storage, or disposal facilities, and each well where it injects fluids underground. Includ	de all springs, rivers and other surface
water bodies in the map area. See instructions for precise requirements.	
XIL NATURE OF BUSINESS (provide a brief description)	
NATURAL GAS SWEETENING PLANT	
And the second s	
to the control of the	
the control of the second of the control of the con	
ان المعالج الم المعالج المعالج المعال	
the state of the s	
en de la composition de la composition The composition de la composition de l	
KIII. CERTIFICATION (see instructions)	
I certify under penalty of law that I have personally examined and am familiar with the information attachments and that, based on my inquiry of those persons immediately responsible for obtain	on suomitted in this application and all
application, I believe that the information is true, accurate and complete, I am aware that there	are significant penalties for submitting
false information, including the possibility of fine and imprisonment.	120131
. NAME & OFFICIAL TITLE (Type or print) B. SIGNATURE	C. DATE SIGNED
POLAND E MOODE VICE DESTREME () ()	/ /2
ROLAND E. MOORE, VICE PRESIDENT &	one 11/19/80
OMMENTS FOR OFFICIAL USE ONLY	
	Later Later Later
A Form 3510-1 (8-80) REVERSE	

					ype in the unshaded areas only a spaced for elite type, i.e., 12	actors/inch).							F	orm Approve	d OMB No.	158	9-S8C	1004	<u> </u>		_
		RM	T	<u> </u>	TOA HAZAR	ENVIRONMENT DOUS WAST								EPA I.D.	1 1 1					10 A	1
	1	i RA	1	Y	CPA (This info	Consolidate ermation is requir			_		105 of	RC	RA.)	TIXID	0 9 5 4	3	7	2	1 6	5	ļ
	FO	RO			AL USE ONLY						1			district to		141	212		-		ì
		PPRO										CO1	MMENTS			<u> </u>	*** .				-
			4	_	126 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			والمراجع الما	2000	Ş. 14		again t			SHOW SHOW				e ich		E T
	Plac	e an	×	··· is	the appropriate box in A or B bel	ow (mark one box	on	/y/ to	indica	te w	hethe	r th	is is the first appl	cation you a	re submitti	ng fo	or yo	ur f	acili	ty or	i
	EP#	I.D	Ň	umi	ion. If this is your first application per in Item I above.						s EPA	1.D	. Number, or if th	is is a revised	application	n, en	ter y	our	tac	lity's	
~	A.				PLICATION (place an "X" belo STING FACILITY (See instruction Complete item	u for definition a						<u>.</u>		Z.NEW FAC							
l	<u></u>	_	₹₩.	-	MO. DAY FOR EXISTING P	ACILITIES, PRO	VIE TE	E TH	E DAT	TE (yr, m	0., d	day)	vи. мо.	DAY	RO1	710 E	TH da	(E C	LITIE DATE DPER	
	8	6	7.	7	0 4 (use the boxes to by the poxes to by the poxes to by the poxes of the poxes	he left)	_	_						74 78 79			CTE			EGI	×
į	5 . 1	֚֓֞֝֟֝֟֝֟֝֟֝ ֚			LILITY HAS INTERIM STATUS	erom ava combre								2. FACILIT	Y HAS A R	CRA	PE	RMI	ΙT		
	III.	PR	oc	ES	SES - CODES AND DESIGN	CAPACITIES															天皇
		enter	ring	CO	CODE — Enter the code from the illes. If more lines are needed, enter	the code/s/ in th	8 SP	ace pr	ovided	1. If	a pro	COSS	will be used that								
	•				process (including its design capac DESIGN CAPACITY — For each co		• ••				-	_		٠.							
		1. A 2. U	MC	TO	T - Enter the amount. F MEASURE - For each amount	entered in column	8(1	1), enti	er the	cod			•	ure codes bei	low that de	Icrib	es th	e ur	nit o	ıt	
		Ţ	1681	MLLE	used. Only the units of measure to PRO- API	net are listed belo PROPRIATE UNI			be use	d.				PRO-	APPROF	RIA	TE (JNI	TS ()F	
	_			Pf		ASURE FOR PRO DESIGN CAPACI		SS	_			28	OCESS	CESS CODE	MEASUI DESI					ss 	_
	C		AII	YEF		LONS OR LITER		٠٠.	_	'AN	tnent K	<u> </u>		T01	GALLON				OR		
	W	ANK	E,P			LONS OR LITER C YARDS OR C METERS	~ • -			-			POUNDMENT .	T02	GALLON LITERS P	S PE	R D.	AY		<i>:</i> -	
	Di	spos	<u>= :</u>	_		LONS OR LITER		* · · · · · · ·		KCI	NER/	110	1 44	T03	TONS PE METRIC GALLON LITERS F	TON S PE	S PE	RH	100		
		JEC AND			D40 ACR Would	LONS OR LITER E-FEET (the volu Cover one acre t	me o d	that	t	hem	nal ör	biol	or physical, chem logical treatment	-	GALLON LITERS P	3 PE	R D	AY.	OR	•	
					HEC CATION DS1 ACR	of one foot) OR FARE-METER ES OR HECTARI	ES	- 12	8	urfa tors	ce im; . Des	onir cribe	occurring in tanks ndments or incine the processes in								
					LITE	LONS PER DAY RS PER DAY LONS OR LITER			. 2	re s	pecs p	POUL	ided; Item III-C.)								
			· +		UNIT OF MEASURE	, a			÷				NIT OF ASURE		•					T OF	
					ASURE CODE	UNIT OF							CODE	UNIT OF M				_	CC	DE	_
1	CI	UBIC	. Y	AR	os	TONS PE METRIC GALLOS	TO	HOUR NS PE	R HO	UR	• • • •	• •	D	HECTARE-	METER	• •	: : :		• •	. F	
	G.	ALL	ON	5 P	ER DAY	LITERS	PEF	NOU F	R		• • • •		. H	HECTARES				· ·	1 AD	. e d the	
	othe	er ca	n h	old	400 gallons. The facility also has a	n incinerator that	Ca:	n burn	up to	20	gailon	s pe	r hour.	· · · · ·							_
	ċ			_	DUP 1]	$\sqrt{}$	7,	//	7	$\overline{7}$	$\overline{}$	////	111	\Box	/	$\sqrt{}$			7	\
.	E E	A.	PR ES:		B. PROCESS DESIGN C.			FOR		E	A. PF		B. PROC	ESS DESIG	N CAPAC			_		OR	
	NE	(fro			1. AMQUNT (specify)	2. UNIT OF MEA- SURE (enter	} ``	FFICI USE ONL	AL	Z B	COE (from abou		· · · · · · · · · · · · · · · · · · ·	AMOUNT		0	UNI ME. URE	^- `	į	FICIA USE NLY	
	Jż	15		"	•	code)	12		11	īŹ	10.	<u></u>	12		27	٥	ode			=	- 5
	X-1	S	0	2	600	G			\coprod	5									\perp		L
	X-2	T	0	3	20	E			11	6								.	-		
	1	D	8	0	0.25	A	Γ			7					1	2	7 4		41	1	T
,	-						-	\vdash	╁┼			}-				+		7	7	+	+
1	2	D	8	3	1 million	G	_	-	\prod	8	_					1	\sqcup	4	4	1	1
	3	D	8	3	1 million	G				9											
	4									10						J				\prod	I
- 1	L	16			10	27 28	29		32		16	- 11	110			7	111	┸	:9		_

Continued from the					e en E			<u>جي الجريدة</u>			
C. SPACE FOR AL	DITIONAL PROCESS CODES (OR FC) N C	DESC	RIBING	OTH	R PROCESS	ES (code '	"T04"). FOR EA	CH PROCESS E	NTERED HERE
111050 m.F. R.E.S.									•	*	ne er er
		·		٠.							
										•	··· ,
					•						
•						•			come and an end	• •	·
									:		
		•			-				To the W		•
						*	•				
	•										•
				. •					,		·
V DESCRIPTION	ON OF HAZARDOUS WAST	TEC	-		to mon		20 marks - 10 marks -	is book and shifted		And the second second second	
EPA HAZARD	OUS WASTE NUMBER - Ente	r the									
	us wastes which are not listed in toxic contaminants of those haza				art D,	enter th	le four—digit	number(s/	from 40 CFH, Si	ubpart C that des	cribes the characteris-
	NNUAL QUANTITY - For esc										
	characteristic or toxic contamina nat characteristic or contaminant		itere	d in c	oiumn	A estim	ate the total	annual qua	entity of all the ne	on-listed weste(s	s) that will be handled
L UNIT OF MEA	SURE - For each quantity ente	ered in	n co	lumn	8 ente	r the u	nit of measur	re code. Ui	nits of measure w	hich must be use	d and the appropriate
codes are:											
						•					
	NGLISH UNIT OF MEASURE				CODI	E.			OF MEASURE		CODE
		• • •	• • •		CODI	E.				•••••	CODE K M
Po To If facility recor		e for			the un	-	KILO	GRAMS. RIC TONS		• • • • • • • •	K
If facility recor account the app	OUNDS	e for			the un	-	KILO	GRAMS. RIC TONS		• • • • • • • •	K
If facility recor account the app PROCESSES 1. PROCESS C	OUNDS	e for i	the v	wasta.	the un	its of m	KILC MET	GRAMS. RIC TONS be convert	ted into one of the	e required units o	K M of messure taking into
If facility record account the application of the processes of the process of the	ds use any other unit of measureropriate density or specific gravition. ODES: szardous waste: For each listed low the waste will be stored, tree	re for ity of the hazar	rdou	nasta. Is was	the un	its of m	METO METO METO METO METO METO METO METO	GRAMS. RIC TONS be convert ect the coc	ted into one of the	e required units o	K M of measure taking into contained in Item III
If facility recor account the app I. PROCESSES 1. PROCESS Of For listed in to indicate in For non-list contained in	ds use any other unit of measur propriate density or specific gravit CODES: exardous waste: For each listed now the waste will be stored, treated hazardous wastes: For each of tem III to indicate all the pro-	re for ity of the hazar	rdou ind/c	wasta, is was or disp ristic	the unterested of toxic	its of market in () fat the conta	KILC METI neasure must column A sel facility, minant enter	GRAMS. RIC TONS be convert ect the coc ad in colum	ted into one of the delay from the list mn A, select the	e required units of of process codes code(s) from the	KM of measure taking into contained in Item III
If facility recon account the app PROCESSES 1. PROCESS Of For listed he to indicate he For non-list contained in that charact Note: Fou	counds	re for ity of the hazarited, and characteristic consistency of the hazarited a	rdou ind/c acter as th	wasta, is was or disp ristic at wi	the unterpretation to the control of	red in of at the contained to smooth	METO METO neasure must column A sel facility, minant enter tore, treat, a a needed: (1)	BRAMS. RIC TOMS be convert ect the coc ed in columnd/or dispress Enter the	de(s) from the list	e required units of of process codes code(s) from the nelisted hezardouscribed above; (2	KM of measure taking into contained in Item III s list of process codes us wastes that possess
If facility recor account the app PROCESSES 1. PROCESS Of For listed to to indicate to For non-list contained in that charact Note: Fou extreme right	ds use any other unit of measure propriate density or specific gravity of specific gravity of specific gravity of the stored, treated hazardous wastes: For each 1 tem 111 to indicate sill the present of the stored for toxic contaminant, or speces are provided for entering tox of Item IV-D(1); and (3) Expressions.	i hazar it hazar ited, an chara ocasse ing pri	rdou ind/d acter as the	waste, is was or disp ristic let wi is cod is spa	the unterpretate the enterpretate of toxic liberth uses. If resprey	red in of at the contained to strong are ided on	METO METO neasure must column A sel facility, minant enter tore, treat, a e needed: (1) page 4, the l	BRAMS. RIC TOMS be convert ect the coc ed in columnd/or dispo	de(s) from the list mri A, select the ose of all the non e first three as de r and the addition	e required units of process codes code(s) from the indisted hezardox scribed above; (2 asl code(s).	KM of measure taking into contained in Item III e list of process codes us wastes that possess E) Enter "000" in the
If facility reconaccount the application of the processes of the process of the p	counds. ds use any other unit of measure repriate density or specific gravity of specific or toxic contaminant, or specific or toxic contaminant, or specific gravity of specific or toxic contaminant, or specific gravity of specific gravity or sp	ty of the transfer of the tran	rdou ind/d acter acter in th	waste, is was or disp ristic at wi is cod is space	the unterpretation that the enterpretation of toxical be used. If resproyers there eas there eas the east the ea	red in c f at the c conta led to st more are ided on t will be	METO METO METO METO METO METO METO METO	ect the coc and in columnd/or dispute Enter the ine number	de(s) from the list mm A, select the ose of all the non a first three as de- r and the addition cass in the space p	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/, provided on the formal code/s or covided on the formal code/s or code code code code code code code code	KM of measure taking into contained in Item III s list of process codes us wastes that possess II) Enter "000" in the
If facility recording account the application of the processes of the process of	ds use any other unit of measure repriate density or specific gravity of specific or toxic contaminant, or specific or toxic contaminant, or specific gravity of speci	i hazar ity of t i hazar ited, an in chara ocasse ing pri Enter i listed (rdou ind/cacter as the roces in the for a scrib	waste, waste, or disp ristic est wi es cod es space THAN ped or	the unterpretation to the content of the uniterpretation of toxical be used to the provinces the content of the following the following the following the following the content of the conten	ored in of fat the contained to simore are ided on twill be	NILC METI neasure must column A sel facility. minant enter tore, treat, a e needed: (1) page 4, the I used, descril	ect the coc ed in columnd/or disposition number ine number to the proc WASTE N	de(s) from the list mn A, select the ose of all the non e first three as de r and the addition cass in the space p	e required units of of process codes code(s) from the nelisted hazardox scribed above; (2 hall code(s), provided on the fordous wastes that	of measure taking into a contained in Item III a list of process codes us wastes that possess II) Enter "000" in the form,
If facility reconsections the application of the ap	counds	i hazar ity of t ity of t in chara- rocesse ing pri Enter i listed (f MOF be der incress	rdound/dacter start the voces the coces in the for a RE T and and sees the coces the c	wasta, wasta, ristic st will st cod st space rHAN bed or enter o be v	the unterpretation that the enterpretation that the uniterpretation that the uniterpretation that the enterpretation that the the foliation to used to	ered in c f at the ic conta- led to st more are ided on t will be EPA HA irm as foolumn A treat, si	measure must column A sel facility. minant enter tore, treat, a needed: (1) page 4, the lives described. AZARDOUS collows: 1. On the samtore, and/or ore, and/or ore.	ect the coched in columnd/or dispose the proc WASTE Neeline complished in the number	de(s) from the list mm A, select the ose of all the none of first three as der and the addition cass in the space p IUMBER — Hazar plete columns 8,0 the waste.	e required units of process codes code(s) from the n-listed hazardouscribed above; (2 hall code(s), provided on the fordous wastes that C, and D by estimates	of measure taking into a contained in Item III is list of process codes us wastes that possess?) Enter "000" in the form. It can be described by nating the total annual
If facility reconsecount the application of the processes of the process of the p	counds	hazar ty of the ty of ty of the ty of the ty of ty of the ty of ty of the ty of ty of ty of the ty of ty o	rdou nd/dacter acter in the for a secrib and ses to A Halon to on the	wasta, ss was sor disp ristic ss cod ss c	the unterpretation of the uniterpretation of the uniterpretation of the uniterpretation of the uniterpretation of the foliation of the uniterpretation of the un	red in of at the contained to still be twill be EPA H/Imm as follumn A treat, state Num	measure must column A sel facility, minant enter tore, treat, a e needed: (1) page 4, the li used, descrit AZARDOUS collows: L'On the samtore, and/or conber that can	ect the coched in columnd/or dispose of the process of the complishes of the process of the proc	de(s) from the list mn A, select the ose of all the nor e first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste.	e required units of process codes code(s) from the n-listed hazardouscribed above; (2 hall code(s), provided on the fordous wastes that C, and D by estimates	of measure taking into a contained in Item III is list of process codes us wastes that possess?) Enter "000" in the form. It can be described by nating the total annual
If facility recor account the app 2. PROCESSES 1. PROCESS Of For listed he to indicate he For non-list contained in that charact Note: Four extreme right 2. PROCESS Of NOTE: HAZARD nore than one EPA 1. Select one of quantity of 2. In column A "Included we 3. Repeat step	counds. ds use any other unit of measure repriate density or specific gravity of spec	i hazar ited, an in chara ocesse ing pri Enter i listed (MOF be des orocesse er, EP/ ntries of	rdound/dacter acter roces in th for a RE T scrib ases to A H and the Nu	waste, is was r dispristic at wi s cod e space s proc l'HAN ed or enter o be t azzard hat lir imber	the unterpretation that can be used on toxical the uses. If rose provess there on the foliation to bus Wales. It has can be used to bus Wales.	ered in c f at the ic conta- ied to st more are ided on t will be EPA HA irm as fo blumn A treat, st ste Num	METO METO METO METO METO METO METO METO	ect the coched in columnd/or dispose the proc WASTE Neeline complished in columns of the number of the process of the complished of the best of the transfer of the process	ted into one of the de(s) from the list mri A, select the ose of all the none of first three as day and the addition tess in the space p IUMBER — Hazar plete columns 8,0 the waste.	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/, provided on the fordous wastes that C, and D by estimate. In column (of measure taking into a contained in Item III is list of process codes as wastes that possess?) Enter "000" in the form, it can be described by nating the total annual D(2) on that line enter
If facility recor account the app 2. PROCESSES 1. PROCESS C For listed he to indicate he For non-elise contained in that charact Note: Fou extreme right 2. PROCESS C NOTE: HAZARD nore than one EPA 1. Select one of quantity of 2. In column A "included we 3. Repeat step	counds	i hazar ity of t i hazar ited, an in chara- rocesse ing pri Enter i listed (MOF be de- mbers : processe er EPA itries (i Waste in line	rdou nd/dacter acter in th for a RE T secrib and ses to A Hate on Nu	vaste, is was or dispersistic at will as cod a space of the space of t	the unit the unit the enter lossed of the unit the unit the unit the following the following was that can be used to the the the that can be used to the the that the the that can be used to the the that the	red in c f at the c contained to st more are ided on t will be EPA HA Imm as fo alumn A treet, a ste Num an be us	measure must beliam A sel facility. minant enter tore, treat, as needed: {1} page 4, the line wased, describility: and/or that can be to describe and/or that can be to describe and X-4 being and X-4	ect the coched in columnd/or dispose the proc WASTE Neeline complispose of the bessel	ted into one of the dels) from the list mri A, select the ose of all the none of first three as der and the addition tess in the space plumber — Hazar plete columns 8,0 the weste, to describe the werdous weste.	e required units of code(s) from the code(s) from the code(s) from the code(s). Scribed above; (2 sel code(s), crovided on the fordous wastes that C, and D by estimate, In column C and dispose of an code code(s).	of measure taking into a contained in Item III is list of process codes as wastes that possess? Enter "000" in the form. It can be described by lating the total annual D(2) on that line enter estimated 900 pounds
If facility recorded account the approximation of t	ds use any other unit of measure repriate density or specific gravity of specific grav	hazarited, an charariced in chararicesses in grant in the certain the characters in the certain the ce	rdoud/double the vices the	waste. Is waster dispersion of dispersion of the code	the unterpretation of the uniterpretation of toxical be used to the foliation of the foliat	red in of at the contained to si more arrived on t will be EPA H//mm as follumn A treat, si sta Num an be us (<2, X-3). In according each	measure must column A sel facility, minant enter tore, treat, a se needed: (1) page 4, the li used, describ a LARDOUS collows: On the samt tore, and/or to the treat can be to describ dition, the factwaste. The o	BRAMS. RIC TONS be convert ect the coc ed in columnd/or dispress Enter the ine number be the proc WASTE N el line com dispose of t be used t the hazar low/ — A ft cility will t ther waste	de(a) from the list mn A, select the ose of all the nor e first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. To describe the wardous weste. The columns and dispose of the corrosive and the	e required units of code/s/ from the nelisted hazardouscribed above; (2 hal code/s/. srovided on the fordous wastes that C, and D by estimate. In column C and dispose of an of three non-listo	of measure taking into a contained in Item III a list of process codes us wastes that possess? Enter "000" in the form. It can be described by sating the total annual D(2) on that line enter estimated 900 pounds and wastes. Two wastes
If facility reconsecount the epplacement of the secount the epplacement of the secount the epplacement of the second of the seco	ds use any other unit of measure repriate density or specific gravity of specific or toxic contaminant, or specific or toxic contaminant, or specific or toxic contaminant, or specific gravity of specific or toxic contaminant, or specific gravity of specific gravity	hazarited, and character in listed if MOF be demonstrated in limitated	rdound/doubles the voces in the voces in the voces in the voces and sea the voces and the voces in the voces	waste. Is waster dispersion of dispersion of the code	the unterpretation of the uniterpretation of toxical be used to the foliation of the foliat	red in of at the contained to si more arrived on t will be EPA H//mm as follumn A treat, si sta Num an be us (<2, X-3). In according each	measure must column A sel facility, minant enter tore, treat, a se needed: (1) page 4, the li used, describ a LARDOUS collows: On the samt tore, and/or to the treat can be to describ dition, the factwaste. The o	ect the coched in columnd/or dispose of the proched to be used to be used to the hazar low/ — A facility will to ther waste a landfill.	de(a) from the list mn A, select the ose of all the nor e first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. To describe the wardous weste. The columns and dispose of the corrosive and the	e required units of of process codes code(s) from the nelisted hazardouscribed above; (2 hal code(s). A provided on the fordous wastes that column (2 hal column (2 hal column (3 hal co	of measure taking into a contained in Item III a list of process codes us wastes that possess? Enter "000" in the form. It can be described by sating the total annual D(2) on that line enter estimated 900 pounds and wastes. Two wastes
If facility reconaccount the appraccount to indicate here that charact Note: Four extreme right 2. PROCESS COTE: HAZARD fore than one EPA 1. Select one of quantity of 2. In column A "included w 3. Repeat step CXAMPLE FOR Coryosive only 00 pounds per year of chromic coryosive only 00 pounds per year of MAZARD.	counds. ds use any other unit of measure repriate density or specific gravity of specific or toxic contaminant, or specific or toxic contaminant of the specific or specific or toxic contamination of the specific or sp	i hazarited, ain characted, ain characted in characted in MOF be demonstrated in line and find 200 pe in e e e e e e e e e e e e e e e e e e	rdound/doubles the roces in the roce	waste, is waster dispersion of the content of the c	the unterpretation of the uniterpretation of toxical be used to the foliation of the foliat	ared in of fat the contained to stand t	measure must column A sel facility, minant enter tore, treat, a se needed: (1) page 4, the li used, describ a LARDOUS collows: On the samt tore, and/or to the treat can be to describ dition, the factwaste. The o	ect the coched in columnd/or dispose the proched in community of the number of the proched is the hazar owl — A ficility will the transfell.	de(a) from the list min A, select the ose of all the none of first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. The columns waste according to the waste of the columns	e required units of of process codes code(s) from the nelisted hazardouscribed above; (2 hal code(s). A provided on the fordous wastes that column (2 hal column (2 hal column (3 hal co	of measure taking into a contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form. It can be described by sating the total annual o(2) on that line enter estimated 900 pounds and wastes. Two wastes re will be an estimated
If facility reconaccount the spp I. PROCESSES I. PROCESS Contained in the character of the contained in that character of the contained in that character of the character of the character of the contained in the character of the contained in the character of the contained in th	ds use any other unit of measure repriate density or specific gravity of specific grav	i hazarited, ain characted, ain characted in characted in MOF be demonstrated in line and find 200 pe in e e e e e e e e e e e e e e e e e e	rdound/dacters the vocas t	vaste. Is waster dispristic at will be code to be to	the unterpretation of the control of	interest in containing of at the contained to stand to stand to stand to stand to stand to stand the containing of the c	measure must column A sel facility. minant enter tore, treat, a se needed: [1] page 4, the li used, describ a LARDOUS collows: A CARDOUS collows: A coll	ect the coched in columnd/or dispose the proched in community of the number of the proched is the hazar owl — A ficility will the transfell.	de(a) from the list min A, select the ose of all the none of first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. The columns waste according to the waste of the columns	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/. Provided on the fordous wastes that C, and D by estimate. In column I of three non-list ignitable and there s code is not entered.	of measure taking into the contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form. It can be described by nating the total annual D(2) on that line enter estimated 900 pounds and wastes. Two wastes he will be an estimated or wastes are will be an estimated or D(1))
If facility reconsection the application of the app	ds use any other unit of measure repriate density or specific gravity or to indicate sill the presistic or toxic contaminant. The specific gravity or specific gravit	i hazarited, ain characted, ain characted in characted in MOF be demonstrated in line and find 200 pe in e e e e e e e e e e e e e e e e e e	rdound/cacterast the vocas the vocas the vocas the vocas in the vocas the vo	waste. Is waster dispristic at will be space or a process of the space or a process of the space of the spac	the unterpretation of the term of the uniterpretation of the uniterpretation of the term o	red in of fat the contained to stand to	measure must column A sel facility. minant enter tore, treat, a needed: (1) page 4, the line and/or collows: (2ARDOUS co	ect the coched in columnd/or dispose the proched in community of the number of the proched is the hazar owl — A ficility will the transfell.	de(a) from the list min A, select the ose of all the none of first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. The columns waste according to the waste of the columns	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/. Provided on the fordous wastes that C, and D by estimate. In column I of three non-list ignitable and there s code is not entered.	of measure taking into a contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form. It can be described by sating the total annual o(2) on that line enter estimated 900 pounds and wastes. Two wastes re will be an estimated
If facility reconsection the application of the app	counce. cou	i hazarited, ain characted, ain characted in characted in MOF be demonstrated in line and find 200 pe in e e e e e e e e e e e e e e e e e e	rdound/oacters the vocas the vocas the vocas in the seas the seas the seas the seas the vocas and the vocas and the vocas and	waste. Is waster dispristic at will be space or a process of the space of the spac	the unit the unit the enter lossed of the unit the unit the unit the unit the following was the following was the control of the unit that control	red in of fat the contained to stand the stand treat, and the stand treat, and the stand treat Number 1. PRODUCT 1. PRODUCT 8	column A sel facility. minant enter tore, treat, a se needed: (1) page 4, the line tore, and/or context that can be to describe that can be to describe that can al will be in a second context. The oral will be in a second context.	ect the coched in columnd/or dispose the proched in community of the number of the proched is the hazar owl — A ficility will the transfell.	de(a) from the list min A, select the ose of all the none of first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. The columns waste according to the waste of the columns	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/. Provided on the fordous wastes that C, and D by estimate. In column I of three non-list ignitable and there s code is not entered.	of measure taking into the contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form. It can be described by nating the total annual D(2) on that line enter estimated 900 pounds and wastes. Two wastes he will be an estimated or wastes are will be an estimated or D(1))
If facility reconsection the application of the app	ds use any other unit of measure repriate density or specific gravity of specific grav	i hazarited, ain characted, ain characted in characted in MOF be demonstrated in line and find 200 pe in e e e e e e e e e e e e e e e e e e	rdound/cacterast the vocas the vocas the vocas the vocas in the vocas the vo	waste. Is waster dispristic at will be space or a process of the space of the spac	the unit the unit the enter lossed of the unit the unit the unit the unit the following was the following was the control of the unit that control	red in of fat the contained to stand to	column A sel facility. minant enter tore, treat, a se needed: (1) page 4, the line tore, and/or context that can be to describe that can be to describe that can al will be in a second context. The oral will be in a second context.	ect the coched in columnd/or dispose the proched in community of the number of the proched is the hazar owl — A ficility will the transfell.	de(a) from the list min A, select the ose of all the none of first three as der and the addition cass in the space plumBER — Hazar plete columns 8,0 the waste. The columns of describe the waste. The columns of the co	e required units of code/s/ from the nelisted hazardox scribed above; (2 hal code/s/. Provided on the fordous wastes that C, and D by estimate. In column I of three non-list ignitable and there s code is not entered.	of measure taking into a contained in Item III a list of process codes us wastes that possess? Enter "000" in the form. It can be described by nating the total annual o(2) on that line enter estimated 900 pounds and wastes. Two wastes re will be an estimated extracted in D(1))

_	: Ph	oto	00	y th	is page before completie you	have	me	e e	than :	26 w	851			(Form Approved OMS No. 158-S80004
	~		_	_	BER (enter from page 1)					<u>·</u>				IVF OPP	TAG
w T					5 4 3 7 2 1 6 1	_	7		W.	_			DUP		2 DUP
IV.	₹			_	N OF HAZARDOUS WAST	ES	(<u>CO1</u>	itir	ued)		1.0				D. PROCESSES
LINE NO.	IH/	A. I AZ. AST nter	AR En	D. 10 (4)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	0	ente ode	EA- Er				(en		B	2. PROCESS DESCRIPTION (If a code is not entered in D(1))
- 1	D	0	0	4	59,800	1	P		D' 8	3 0	1	7 - 70	17 - 19	27 - 22	and the state of t
. 2	D	0	0	4	6,500,000		Р		D 8	3 3		1			Most of pure water evaporates
3	D	0	0	7	22 million		Р		D 8	3 3					Most of pure water evaporates
4								_					T . T .		·
5													1 1		
6										1					·
7										1					and the second of the second o
8					- 11 1					1	\int	1	# . # . ·		
9										7		1 1			
10												1 - 1			
11															
12										Ţ		- ·			
13										- I -:.					
14										1		1 - 1			·
15										, 		1 1			
16												1-1			·
17										-1				, , , , ,	
18													1 1	1 1	
·19						\prod							1		
20					•					1		1 1			
21										1	T	1	1		
22						T					\int	1 1			
23						T			1	1		1 1			1001943
24												J "I	1 1	1	1201843
25						T			1	•		1 ,1	1 1		
26				10	27 19	T				· ;-	1	7	1 1	17 . 10	
EDA	_		_		2 20)	—		-							CONTINUE ON REVER

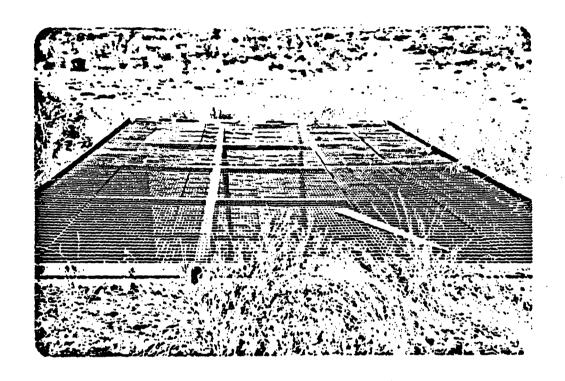
						a great contract to the same of the same o
() () () () () () () () () ()	tinued)			4.7	4	
E. USE THIS SPACE TO LIST ADDITIONAL PROC	ESS CODES FRO	M ITEM D(1) ON PAG	E 3.			
· · · · · · · · · · · · · · · · · · ·	4		•			
·				•		
						•
	-				•	
1 mm						
·		-				
					•••	• • • •
• •			•	•		••
						
EPA I.D. NO. (enter from page 1)						the second secon
ETYD095437216745						
11 1 10 10 10 10 10 10 10 10 10 10 10 10		·				
V. FACILITY DRAWING						
All existing facilities must include in the space provided on p	page 5 a scale drawing	g of the facility (see instruc	tions for more a	etail).		
VI. PHOTOGRAPHS				4045		
All existing facilities must include photographs (aeria					sting sto	rage,
treatment and disposal areas; and sites of future stor	age, treatment or o	disposal areas (see instru	ctions for moi	re detail).	ب جيرات جاد	
VII. FACILITY GEOGRAPHIC LOCATION		Marie Control of the Party of the Control of the Co			-	
LATITUDE (degrees, minutes, & seconds)		LONGI	TUDE (degrees, s	minulas As	econasi	
		<u> </u>			1	
3041048			1023	1 0 1	3	
3 0 4 1 0 4 8			1023	1 01	3	
VIII. FACILITY OWNER			1023	1 0 1	3	
			1023	1 0 1	3	he left and
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below.	sted in Section VIII	on Form 1, "General Infor	1 0 2 3 23 74 73	1 0 1	3	he left and
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as li	sted in Section VIII	on Form 1, "General Infor	1 0 2 3 23 74 73	1 0 1	3	he left and
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below.	sted in Section VIII	on Form 1, "General Information Form 1, complete the fi	1 0 2 3 23 74 73	1 0 1 7 7 7 10 the	box to the	he left and
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as liskip to Section IX below. B. If the facility owner is not the facility operator as list.	sted in Section VIII	on Form 1, "General Information Form 1, complete the fi	1 0 2 3 23 74 73	1 0 1 7 7 7 10 the	box to the	·
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as liskip to Section IX below. B. If the facility owner is not the facility operator as list.	sted in Section VIII	on Form 1, "General Information Form 1, complete the fi	1 0 2 3 mation", place a	1 0 1 77 10 the	box to the	·
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing to the facility owner is not the facility operator as listing to the fa	sted in Section VIII	on Form 1, "General Information Form 1, complete the fi	1 0 2 3 mation", place a	1 0 1 7 7 7 10 the	box to the	·
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as liskip to Section IX below. B. If the facility owner is not the facility operator as list. 1. NAME OF FACIL. 3. STREET OR P.O. BOX	sted in Section VIII sted in Section VIII ITY'S LEGAL OWN	on Form 1, "General Information Form 1, complete the file."	1 0 2 3 mation", place a	1 0 1 77	box to the	rea code & no.)
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as liskip to Section IX below. B. If the facility owner is not the facility operator as list. 1. NAME OF FACILIES.	sted in Section VIII sted in Section VIII o	on Form 1, "General Information Form 1, complete the file."	1 0 2 3 mation", place a	1 0 1 77	box to the	rea code & no.)
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as liskip to Section IX below. B. If the facility owner is not the facility operator as list. 1. NAME OF FACIL. 2	sted in Section VIII sted in Section VIII ITY'S LEGAL OWN	on Form 1, "General Information Form 1, complete the file."	mation", place a	1 0 1 77	box to the	rea code & no.)
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing in the facility owner is not the facility operator as listing in the facility owner is also the facility operator as listing in the facility owner is also the facility operator as listing in the facility operator as	sted in Section VIII sted in Section VIII ITY'S LEGAL OWN	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN	mation", place a	1 0 1	B NO. (ar	code & no.)
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing in the facility operator as listing	sted in Section VIII sted in Section VIII of the section VIII of t	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a sollowing items:	1 0 1 22 77 19 19 19 19 19 19 19 19 19 19 19 19 19	B NO. (ar	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing in the facility operator as listing. I. NAME OF FACIL. 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete	sted in Section VIII sted in Section VIII of the section VIII of t	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a sollowing items:	1 0 1 22 77 19 19 19 19 19 19 19 19 19 19 19 19 19	B NO. (ar	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing in the facility operator as listing	sted in Section VIII sted in Section VIII of the section VIII of t	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a sollowing items:	1 0 1 22 77 19 19 19 19 19 19 19 19 19 19 19 19 19	B NO. (ar	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing to Section IX below. 1. NAME OF FACILITY 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type)	sted in Section VIII sted in Section VIII of the section VIII of t	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a collowing items:	1 0 1 22 77 19 19 19 19 19 19 19 19 19 19 19 19 19	B NO. (ar 6. ZIP nd all art believe to	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing to Section IX below. 1. NAME OF FACILITY 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT	sted in Section VIII sted in Section VIII of the section VIII of	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a collowing items:	2. PMON 2. PMON 3. PMON 4.	B NO. (ar 6. ZIP nd all art believe to	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing to Section IX below. 1. NAME OF FACILITY 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type)	sted in Section VIII sted in Section VIII of the section VIII of	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a collowing items:	2. PMON 2. PMON 3T. 3d in this armation, I mitting fals	B NO. (ar 6. ZIP nd all art believe to	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing to Section IX below. 1. NAME OF FACILITY 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT	sted in Section VIII sted in Section VIII of the section VIII of	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obt	mation", place a collowing items:	2. PMON 2. PMON 3. PMON 4.	B NO. (ar 6. ZIP nd all art believe to	cope
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as listing. I. NAME OF FACIL 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally of certify under penalty of law that I have personally of law that I have persona	sted in Section VIII of the st	on Form 1, "General Information Form 1, complete the file. 4. CITY OR TOWN familiar with the informately responsible for obtaining the period of the perio	mation", place a collowing items:	2. PHON 2. PHON 3. ST. 3. ST. 3. ST. 3. ST. 3. ST. 4. And In this a mation, I mitting fals 3. DATE SIG	box to the second of the secon	coot tached that the nation,
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as listing to Section IX below. B. If the facility owner is not the facility operator as list. I. NAME OF FACIL. 3. STREET OR P.O. BOX IX. OWNER CERTIFICATION I certify under penalty of law that I have personally a documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT CHIEF ENGINEER X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally a documents and that haved on my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and that have a my inquiry of those in the complete series and the complete series and the complete series and the complete series and the complete series are series and the complete series and the complete series and the complete series are series and the complete series and the complete series are seri	sted in Section VIII of the st	on Form 1, "General Information Form 1, complete the financial of the familiar with the informately responsible for obtaining the familiar with the information of the familiar with the information	mation", place a sollowing items:	2. PMON 2. PMON 2. PMON 31 31 31 31 31 31 31 31 31 3	box to the box to the believe to the	code & no.) Code tached that the hation,
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as lisskip to Section IX below. B. If the facility owner is not the facility operator as list. I. NAME OF FACIL I. NAME OF FACIL I. NAME OF FACIL I. NAME OF FACIL II. NAME OF FACIL II. NAME OF FACIL III. IX. OWNER CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINER X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete insubmitted information is true, accurate, and complete	sted in Section VIII of the st	on Form 1, "General Information Form 1, complete the financial of the familiar with the informately responsible for obtaining the familiar with the information of the familiar with the information	mation", place a sollowing items:	2. PMON 2. PMON 2. PMON 31 31 31 31 31 31 31 31 31 3	box to the box to the believe to the	code & no.) Code tached that the hation,
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as lisskip to Section IX below. B. If the facility owner is not the facility operator as lisskip to Section IX below. 1. NAME OF FACILITY 1. NAME OF FACILITY 2. STREET OR P.O. BOX 1. Cartify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment.	examined and am adividuals immedials. I am aware that	on Form 1, "General Information Form 1, complete the financial of the familiar with the informately responsible for obtaining the familiar with the information of the familiar with the information	mation", place a sollowing items:	2. PMON 2. PMON 2. PMON 31 32 31 31 32 33 34 35 36 37 31 31 31 31 31 31 31 31 31	box to the box to the believe to be information all attractions and all attractions are information an	code & no.) Code tached that the hation,
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as lisskip to Section IX below. B. If the facility owner is not the facility operator as list. I. NAME OF FACIL I. NAME OF FACIL I. NAME OF FACIL I. NAME OF FACIL II. NAME OF FACIL II. NAME OF FACIL III. IX. OWNER CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment. A. NAME (print or type) ROLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINER X. OPERATOR CERTIFICATION I certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete insubmitted information is true, accurate, and complete	sted in Section VIII of the st	on Form 1, "General Information Form 1, complete the financial of the familiar with the informately responsible for obtaining the familiar with the information of the familiar with the information	mation", place a sollowing items:	2. PMON 2. PMON 2. PMON 31 31 31 31 31 31 31 31 31 3	box to the box to the believe to be information all attractions and all attractions are information an	code & no.) Code tached that the hation,
VIII. FACILITY OWNER A. If the facility owner is also the facility operator as lisskip to Section IX below. B. If the facility owner is not the facility operator as list. 1. NAME OF FACIL. 1. NAME OF FACIL. 3. STREET OR P.O. BOX 1. It is is in the facility operator as list. 1. NAME OF FACIL. 2. It is is in the facility operator as list. 1. NAME OF FACIL. 2. It is is in the facility operator as list. 2. It is in the facility owner is not the facility operator as list. 1. NAME OF FACIL. 2. It is in the facility owner is also the facility operator as list. 2. NAME OF FACIL. 3. STREET OR P.O. BOX 1. Certify under penalty of law that I have personally of documents, and that based on my inquiry of those in submitted information is true, accurate, and complete including the possibility of fine and imprisonment.	examined and am adividuals immedials. I am aware that	on Form 1, "General Information Form 1, complete the financial of the familiar with the informately responsible for obtaining the familiar with the information of the familiar with the information	mation", place a sollowing items:	2. PMON 2. PMON 2. PMON 31 32 31 31 32 33 34 35 36 37 31 31 31 31 31 31 31 31 31	box to the box to the believe to be information all attractions and all attractions are information an	code & no.) Code tached that the hation,

rm Approved OMB No. 158-S80004

FACILITY PHOTOGRAPHS PART VI

ACTIVE FACILITIES

Photographs were taken November 4, 1980



This picture was taken looking to the north. The area beyond the vault represents an expansion area where a new vault is presently under construction. This picture was made before construction was begun.

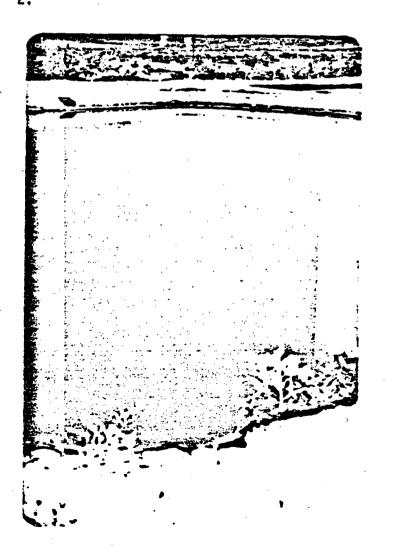


INACTIVE FACILITIES

Photographs were taken November 4, 1

TRANSWESTERN PUCKETT PLANT TXD095437216

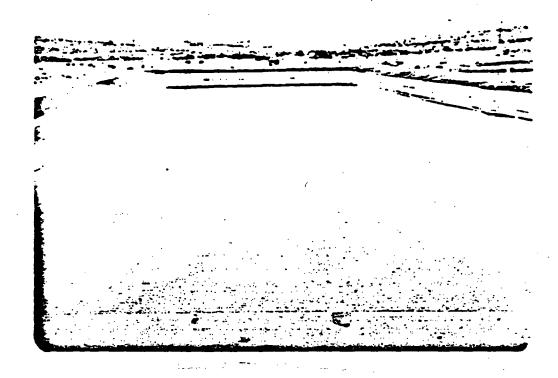
2,



2 Existing Hypalon Lined Disposal Pits

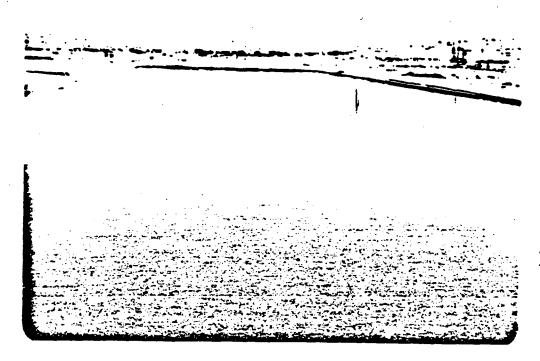
ACTIVE FACILITIES Photographs were taken November 4, 1980

TRANSWESTERN PUCKETT PLANT TXD095437216



2.

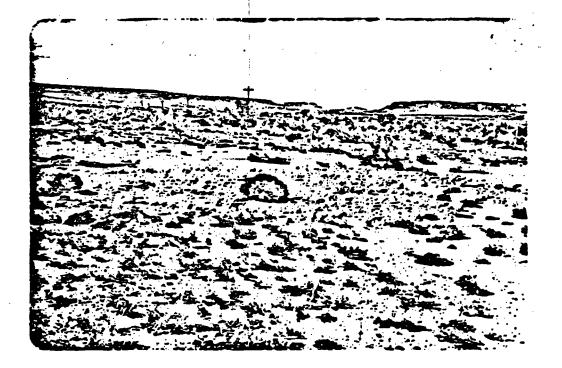
1.



INACTIVE FACILITIES
Photographs were
taken November 4, 1980

TRANSWESTERN PUCKETT PLANT TDX095437216

1.



}							•										•	
•			٠.		en Service						٠.						y y respective assumption of the contract of t	
					e en esperante de la companya de la		·	 .			- ~					and the second of the second		
					معتور مستداء عرضي دمية العدار المناسعة							•				-		
					The second secon							10.1						in the control of the
					f										•		•	
						•				-					-			••
T37 *			-		N OF HAZABBONE WAST	_								in the second	director "at" a	ن نامسل واد کرند کان این این	and the designation of the Company of the Company	State of the second
A. EP her tic B. ES	A F ndie s an TIN	iAZ ha d/o	Zart zart r th	dour te to	N OF HAZARDOUS WASTE US WASTE NUMBER — Enter is wastes which are not listed in 4 exic contaminants of those hazard NNUAL QUANTITY — For each haracteristic or toxic contaminant	ine O C ous list	four FR, wast	Subtes.	git n open	umi D,	ber 1 ente	tror er ti	n 4 he f	O CFFi our—d	, Subpa igit nun timate 1	art D for each nber(s) from 40 the quantity o	Isted hazardous waste to CFR, Subpart C that do for that do for that waste that will be	you will handle. If you escribes the characteris-
					et characteristic or contaminant.					*****		•••••		tile to	œi œiim	bu danini o	an the light-rated wash	15) mat will be removed
	iiT des	-	_	EAS	URE - For each quantity entere	d ir	n col	umi	n B	ente	er th	e u	nit	of mea	sure co	ode. Units of m	neasure which must be u	sed and the appropriate
					GLISH UNIT OF MEASURE						E.		•				ASURE	CODE
		,			UNDS					T								
					s use any other unit of measure opriate density or specific gravity	for (quar	itity	', th	e un	nitš d	of r	T168	sure m	ust be c	converted into	one of the required units	of measure taking into
d. Pr	OC	ESS	ES			٠		•										•
1,					DES: pardous waste: For each listed h	0706	40	. 10/5	eta.	ente	arad	in	ىلەم	ımn A	enlare t	the code/el fro	m the list of process cod	es contained in Item III
	to	indi	cat	e ho	w the waste will be stored, treated	d, 81	nd/o	r dis	spos	ed o	of at	the	fac	ility.			•	
					ed hezardous wastes: For each colored the process of the process o													
	the	rt cl	nare	cte	ristic or toxic contaminant.										•	•		•
ļ					spaces are provided for entering box of Item IV-D(1); and (3) En													(2) Enter "UOU" in the
2.	PR	oc	ESS	S DE	SCRIPTION: If a code is not list	ed f	for a	pro	cess	tha	t wil	II b	e us	ad, der	cribe th	ne process in th	e space provided on the	form.
NOTE	: !	1AZ	ZAF	RDC	US WASTES DESCRIBED BY N	AOR	E T	HAI	N O	NE	EPA	, H	AZ.	ARDO	US WA	STE NUMBER	R - Hazardous wastes th	at can be described by
more	thar	on	e E	PA	Hazardous Waste Number shall be	des	ıcrib	ed o	n th	e fa	m t	os f	olla	WS:				
, ,	GU	anti	tv (of t	the EPA Hazardous Waste Numb he waste and describing all the pro	ces	tes to	o be	use	d to	trea	nt. s	ton	e. and/	or dispo	ose of the waste	₽.	•
2.					of the next line enter the other the above" and make no other entr					Wa	ste !	Nur	nbe	r that	cen be	used to describ	be the waste. In column	D(2) on that line enter .
3.					for each other EPA Hazardous W					et ca	en b	e us	ed '	to desc	ribe the	e hezardous wa	iste.	
EXAM	/PL	E F	OR	CC	MPLETING ITEM IV (shown in	line	nun	nbe	rs X	-1. 3	X-2,	X	3, ar	nd X-4	below)	- A facility w	ill treat and dispose of a	n estimated 900 pounds
per ye	ar (of c	hro	me	shavings from leather tanning an nd there will be an estimated 20	d fii	nishi	ng c	pera	atio:	n. In	ad	diti	on, the	facility	y will treat and	dispose of three non-lis	sted wastes. Two wastes
100 p	oun	ds (er '	Yea	of that waste, Treatment will be	in a	n in	cine	rato	ran	d dis	SDO	sal v	will be	in a lan	dfill.		ere will be an estimated
		۱ <u>.</u> E	PA				UNI ME									D. PRO	CESSES	
LINE NO.	WA	ST		10	B. ESTIMATED ANNUAL QUANTITY OF WASTE	S1	u R E Inter ode)			•	1. P	RO	(en	SS CO	DES		2. PROCESS DE: (if a code is not en	SCRIPTION tered in D(1))
X-1	K	0	5	4	900		P	!	T'a	3	D	8	0		' ⁻			1201854
X-2	D	0	0	2	400	Г	P	1	r') 3	D	8	0	1	-	1		
X-3	D	0	0	1	100		P	1	r'c	3	D	8	0		+	1		
X-4	D	0	0	2			\prod	\dagger	1		T	1	1	1	1		. included wit	th above
EPA I	-	35	10	3 (-80)				·		1_	_	_					CONTINUE ON PAGE
•	,			_ ••	- :					•	AG	, E,	2	OF 5				CORTINUE UN PAGE

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

and the second of the second o

en de la composition La composition de la

ع و أخر ه هم معلمية فيفع في الأخراء في الأخراء الأخراء الأخراء الأخراء الأخراء الأخراء الأخراء الأخراء الأخراء

the system of the state of the

Cantinued from the front,

Contin	ued Ph	fro oto	m p	ege y th	2. s page before completing if	have	mo	ne i	then	20		estes	to lis	L		(Farm Approved OMB No. 158-S80004
	T		_	1	SER (enter from page 1)		7		1					R OFFI	CIAL	USE	P/AC
W					0 7 2 9 0 3 8 1	7	7	Δ	w	_	_			DUP			2 DUP
		A. I	EP#	\Box	N OF HAZARDOUS WAST	I c.	UN	IT	ue	<u>d)</u>	_	- 4	or ser		ನಿತ್ಯ		D. PROCESSES
LINE NO.	W A (e)	AZ AST nter	E N	10	B. ESTIMATED ANNUAL QUANTITY OF WASTE	1 8	UR enta	E				1. Pf	70CE (en	SS CODI	ES .		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D	0	0	***	40,000	7	P		D'		0	#7 ₁	- #	37 - 1	27	, - , 28.	Iron Sulfide Filters: Active portion represents 25% of weight
2	D	0	0	7	30 million	T	Р		s	0	4	Г	1	-	\top		Most of pure water evaporates
3						1	П		-		•	1	-		\dagger	1 1	
4						T			,	_		-	1	-	+		
5	\vdash	\vdash				1			-	_	•	-	1	1	╁╌	,	
6	\dagger		H			\dagger				·	_	-	_	+ + +	- - -	• •	
7		-	-		Secretaria de la companya del companya de la companya del companya de la companya	-		-	h		1	-			+-	• •	and the second s
8	T	\vdash			, 	+			h		1	1			\dagger		
9	T			H					h	-	1	1			\dagger	1 1	
10	T				·	1				_	•		i		T		
11						1				1		1	•	1	+	1 1	
12									1	ì	.	_	•	1 7	T	1 - Ÿ	
13			_			†		-			1		1	1 1, 1	T		
14	<u> </u>					T					1	•	•	1 1	+		
15										_	1		1	1 1		1	
16										Γ	1		T		+	. .	
17						1		┢		•	1	1			+	1 1	
18						\dagger		 	'	•	1	-	1	1		1	
19					•						T	1	T	177	+	1 1	
20		\vdash		H		T				1	r	-	-	1	\top	1	
21	T	T		H		T				1	T		1	1 1	+	1-1-	
22						\dagger				1	τ	7	1	1 1	+	1 1	
23		\vdash		H		\dagger			\vdash	1	1	,			\dagger	1 1	
24				H		\dagger					1	 		+	\dagger		1291855
25		\vdash	-	H		\dagger					T-		-1-	+	+	· ·	
26	-	\vdash		$ \cdot $		+		-		1	1	+	ı	1 1	+	1 1	
EPA	For	m 3	510	-3 (i		٦	20		27	-	Ţ.	27	- 29	27 - 2	17	- 29	CONTINUE ON REVERSE

Continued from the front. IV. DESCRIPTION OF HAZARDOUS WAS S (continued)	To a regard to the attendance that a first
- 1	OCESS CODES FROM ITEM D(1) ON PAGE 3.	
i kanan sa	and the second s	
A CONTRACTOR OF THE CONTRACTOR		
	was an experience of the second secon	
-		•
	· · · · · · · · · · · · · · · · · · ·	• ,
and the second s	and the same of the control of the c	a a series de la companya de la com
The second secon	e de la partir de la trata de la companya del companya de la companya de la companya del companya de la companya del la companya de la compan	and the second of the second o
		· · · · · · · · · · · · · · · · · · ·
1		
The state of the s	· · · · · · · · · · · · · · · · · · ·	The second secon
		,, ,, ,,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,
	·	
the first of the second se	The second secon	and the same of th
		•
SPA I.D. NO. (enter from page 1)	e transmission and ⊕ 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1	
F 1 x 0 0 0 0 7 2 9 0 3 8 6		
	arian is being bereit and an arian and are an arian and are are an area of the contract of the contract of the	
All existing facilities must include in the space provided VI. PHOTOGRAPHS	on page 5 a scale drawing of the facility (see instructions for	more detail).
Transfer from	perial or ground—level) that clearly delineate all existing	on structures: existing storage
	torage, treatment or disposal areas (see instructions for	
- 0.000	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
VII. FACILITY GEOGRAPHIC LOCATION		
والمناوي والمستقد والمتفاقي والمستقد		grees, minutes, & seconds)
VII. FACILITY GEOGRAPHIC LOCATION		
VII. FACILITY GEOGRAPHIC LOCATION		
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1 5 7 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		grees, minutes, & seconds)
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information",	place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	LONGITUDE (de	place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information",	place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", is	place an "X" in the box to the left and terms:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", is	place an "X" in the box to the left and
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", the section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER	place an "X" in the box to the left and terms:
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", is listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER	place an "X" in the box to the left and terms:
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", it is listed in Section VIII on Form 1, complete the following it CILITY'S LEGAL OWNER 4. CITY OR TOWN	place an "X" in the box to the left and 2. PMDNE NO. (area code & no.) 5. ST. 6. ZIP CODE
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1 45 41 41 41 41 41 41 41 41 41 41 41 41 41	as listed in Section VIII on Form 1, "General Information", is as listed in Section VIII on Form 1, complete the following is CILITY'S LEGAL OWNER 4. CITY OR TOWN G G If y examined and am familiar with the information such individuals immediately responsible for obtaining the	place an "X" in the box to the left and 2. PMONE NO. (area code & no.) 5. ST. 6. ZIP CODE bmitted in this and all attached to information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1 45 41 17 47 48 48 48 48 48 48 48 48 48 48 48 48 48	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G G 4. CITY OR TOWN G individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for	place an "X" in the box to the left and 2. PMONE NO. (area code & no.) 5. ST. 6. ZIP CODE bmitted in this and all attached to information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 1	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN C If y examined and am familiar with the information sufficient penalties for the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the information to the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the information sufficient.	place an "X" in the box to the left and 2. PHONE NO. (area code & no.) 8. ST. 6. ZIP CODE bornitted in this and all attached are information, I believe that the or submitting false information,
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G G 4. CITY OR TOWN G individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for	place an "X" in the box to the left and 2. PMONE NO. (area code & no.) 5. ST. 6. ZIP CODE bmitted in this and all attached the information, I believe that the
VII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1 45 71 45	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN C G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the olete. I am aware that there are significant penalties for the color of the co	place an "X" in the box to the left and 2. PHONE NO. (area code & no.) 8. ST. 6. ZIP CODE bornitted in this and all attached are information, I believe that the or submitting false information,
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN C G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the olete. I am aware that there are significant penalties for the color of the co	place an "X" in the box to the left and 2. PHONE NO. (area code & no.) 8. ST. 6. ZIP CODE bomitted in this and all attached the information, I believe that the for submitting false information,
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 VIII. FACILITY OWNER WA. If the facility owner is also the facility operator skip to Section IX below. B. If the facility owner is not the facility operator in not the facility operator is not the facility operator i	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following is CILITY'S LEGAL OWNER 4. CITY OR TOWN G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the plate. I am aware that there are significant penalties for the complete of	place an "X" in the box to the left and sems: 2. PMONE NO. (area code & no.) 5. ST. 6. ZIP CODE bmitted in this and all attached le information, I believe that the or submitting false information, C. DATE BIGNED 19 6 7
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 VIIII. FACILITY OWNER WA. If the facility owner is also the facility operator skip to Section IX below. B. If the facility owner is not the facility operator is also the facility operator is not the facility operator	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the content of t	place an "X" in the box to the left and sems: 2. PMONE NO. (area code & no.) 19
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 VIIII. FACILITY OWNER WA. If the facility owner is also the facility operator skip to Section IX below. B. If the facility owner is not the facility operator is also the facility operator is not the facility operator	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that the penalties for the polete. I am aware that the penalties for the	place an "X" in the box to the left and sems: 2. PMONE NO. (area code & no.) 19
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that there are significant penalties for the polete. I am aware that the penalties for the polete. I am aware that the penalties for the	place an "X" in the box to the left and sems: 2. PMONE NO. (area code & no.) 19
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1 45 41 17 41 45 71 4	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore.	place an "X" in the box to the left and some information, I believe that the per submitting false information, C. DATE SIGNED Left information, I believe that the per submitting false information in the per submitted in the
VIII. FACILITY GEOGRAPHIC LOCATION LATITUDE (degrees, minutes, & second 3 1 5 7 0 0 1 1 45 41 45 71 4	as listed in Section VIII on Form 1, "General Information", as listed in Section VIII on Form 1, complete the following in CILITY'S LEGAL OWNER 4. CITY OR TOWN G G If y examined and am familiar with the information sure individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore. I am aware that there are significant penalties for the individuals immediately responsible for obtaining the colore.	place an "X" in the box to the left and 2. PMDNE NO. (area code & no.) 5. ST. 6. ZIP CODE 4. 11 12 13 15 11 11 braitted in this and all attached the information, I believe that the for submitting false information, C. DATE SIGNED 19 80 braitted in this and all attached the information, I believe that the for submitting false information, c. DATE SIGNED 19 80 10 3 0 1 6 2. PMDNE NO. (area code & no.) 5. ZIP CODE 11 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15

depth 4" Surface Impoundment PROPERTY LINE Entrance PROCESS AREA 1100'

TRANSWESTERN

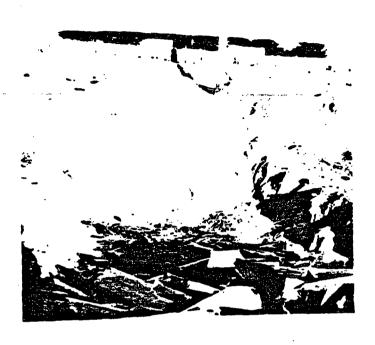
KEYSTONE PLANT

Scale: 1 inch = 200 feet

E.P.A.ID: TXD000729038

ACTIVE FACILITIES

Photographs were taken November 4, 1980

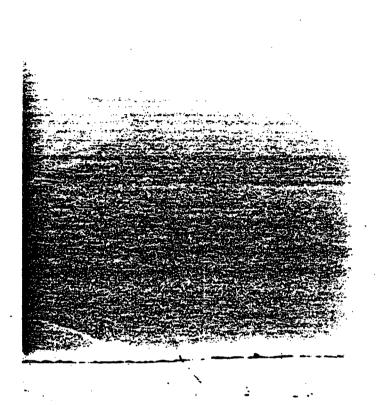


TRANSWESTERN'S KEYSTONE PLANT Solid Waste Landfill

E.P.A.ID: <u>TXD000729038</u>

ACTIVE FACILITIES

Photographs were taken November 4, 1980



TRANSWESTERN'S KEYSTONE PLANT
Hypolon Lined Pond

CONTINUED FROM THE FRONT	<i>C</i>
	The second secon
Associate of Wilescone A FIRST Control for the Association	B. SECOND
7 4 9 2 2 NATURAL GAS SWEETENING	(apecify)
C. THIRD	B. FOURTH
7	57
VIIL OPERATOR INFORMATION	manifest contract and an entire and an entire and a state of the state of the state of the state of the state of
A. NAME	B. Is the name listed in Itam VIII-A also the
	COMPANY A YES DNO
0 TO TO THE STATUS OF OPERATOR (Enter the appropriate letter into the ans	wer box; tf "Other", pecify,) B. PHONE (cres code & no.)
	(specify) A 7 1 3 7 5 9 5 3 5 5
E. STREET ON P.O. BOX	
P'0' B'0'X' 2'5'2'1	
F. CITY OR TOWN	G.STATE H. ZIP CODE IX INDIAN LAND
H'0'U'S'T'0'N'	TX 7 7 0 0 1 le the facility located on Indian lands? YES ANO
X EXISTING ENVIRONMENTAL PERMITS	
	ns from Proposed Sources)
9 N 9 P	
8. UIC (Underground Injection of Fluids) 8. OTH	ER (zpecify)
9 0 1 1 1 3 -	8'9'1'-0' (specify) FILE NO NOT A PERMIT
(1) 10 [7] 18	EN (specify)
36311 1, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(specify)
11 10 12 14 10 10 10 10 10 10 10 10 10 10 10 10 10	10
	一大は大きないというできないというないということはないというないというという
the outline of the facility, the location of each of its existing and	to at least one mile beyond property bounderies. The map must show proposed intake and discharge structures, each of its hazardous waste jects fluids underground. Include all springs, rivers and other surface nts.
L NATURE OF BUSINESS (provide a brief description)	
NATURAL GAS SWEETENING PLANT	
•	•
The second secon	
and the second s	
and the second s	·······
en e	The second secon
III. CERTIFICATION (see instructions)	The same of the sa
cartify under penalty of law that I have personally examined and	am familier with the information submitted in this application and all
t accomments and that, based on my inquiry of those persons im Lapplication, I believe that the information is true, accurate and confidence information, including the possibility of fine and imprisonment	mediately responsible for obtaining the information contained in the amplete. I am aware that there are significant penalties for submitting
L NAME & OFFICIAL TITLE (Sype or print)	and the weather the control of the c
ROLAND E. MOORE, VICE PRESIDENT &	Sandham 11/19/Co
OMMENTS FOR OFFICIAL USE ONLY	
C	
A Form 3510-1 (8-80) REVERSE	The second secon

Please print or type in the unsheded				
FORM SEPA		Permits Program	I. EPA I.D.	O O O 7 2 9 0 2 0 1
FOR OFFICIAL USE ONLY	- And the second second		MMENTS	
APPROVED (yr. mo. & day)				
II. FIRST OR REVISED APPL	ICATION	-	Control of the second	the state of the s
Place an "X" in the appropriate borevised application. If this is your f EPA I.D. Number in Item I above.	irst application and you already kn	ow your facility's EPA I.D		
n	See instructions for definition of "Complete Item below.)	existing" facility.	The second management of the second s	ILITY (Complete item below.) FOR NEW PACILITIES, PROVIDE THE DATE
8 6 8 1 2 1 (use	EXISTING FACILITIES, PROVI RATION BEGAN OR THE DATE the boxes to the left)	CONSTRUCTION COMM	MO. NO. NO. NO. NO. NO. NO. NO. NO. NO. N	TION BEGAN OR IS EXPECTED TO BEGIN
B. REVISED APPLICATION (•	Item I above)	2. PACILIT	Y HAS A RCRA PERMIT
III. PROCESSES - CODES AN	ID DESIGN CAPACITIES	Carbon and the party		Print Town or the State of the
describe the process lincluding i	needed, enter the code(s) in the space pro	pace provided. If a process vided on the form (Item II.	will be used that is not includ I-CJ.	
		1), enter the code from the		low that describes the unit of
PROCESS	PRO- APPROPRIATE UNITS CESS MEASURE FOR PROC CODE DESIGN CAPACITY	ESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage: CONTAINER (barrel, drum, etc.) TANK WASTE PILE	501 GALLONS OR LITERS 502 GALLONS OR LITERS 503 CUBIC YARDS OR	Trestment: TANK SURFACE IM	T01 POUNDMENT T02	GALLONS PER DAY OR LITERS PER DAY GALLONS PER DAY OR
SURFACE IMPOUNDMENT Disposal:	S04 GALLONS OR LITERS	INCINERATO	R T03	LITERS PER DAY TONS PER HOUR OR METRIC TONS PER HOUR: GALLONS PER HOUR OR LITERS PER HOUR
LAND APPLICATION OCEAN DISPOSAL	D79 GALLONS OR LITERS D80 ACRE-FEET (the volume would cover one acre to a depth of one foot) OR HECTARE-METER D81 ACRES OR HECTARES D82 GALLONS PER DAY LITERS PER DAY	thermal or biol processes not c surface impour ators. Describ	or physical, chemical, T04 logical treatment occurring in lanks, adments or inciner s the processes in ided; Item III-C.)	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT UNIT OF MEASURE	UNIT OF MEASURE CODE UNIT OF M	ME	NIT OF ASURE CODE UNIT OF M	UNIT OF MEASURE EASURE CODE
GALLONS. LITERS. CUBIC YARDS. CUBIC METERS GALLONS PER DAY EXAMPLE FOR COMPLETING IT	TONS PER METRIC TO GALLONS	ONS PER HOUR	D HECTARE- W ACRES E HECTARES	METER
other can hold 400 gallons. The fac	cility also has an incinerator that ca	in burn up to 20 gallons pe	r hour.	and the same source and the
C DUP	12 (15)	77.77		111111
CESS CODE	Cify) SURE	FOR CESS CODE USE ONLY	B. PROCESS DESIG	2. UNIT FOR OFFICIAL USE (enter ONLY
X-1 S 0 2 600	code)	1 1 5 1 1		27 20 29 · 12

B. PROCESS DESIGN CAPACITY
CEBS
CODE
CITY (specify)

1. AMOUNT (specify)

2. UNIT OF MEA-SURE (from list above)

1. AMOUNT (specify)

2. UNIT OF MEA-SURE (from list above)

3. UNIT OF MEA-SURE (from list above)

4. USE (from list above)

5. UNIT OF MEA-SURE (from list above)

6. USE (from list above)

7. USE (from list above)

8. PROCESS DESIGN CAPACITY

SURE (from list above)

9. UNIT OF MEA-SURE (from list above)

1. AMOUNT

SURE (from list above)

SURE (from list above)

1. AMOUNT

SURE (from list above)

SURE (from list

	ied ti	mo.	the	front.						4	•	
				(continued)		or ork	\$ 7 \$\$\$	er saver	Continue of			
C. SPAI INCI	UDI	DR DI	ADI	DITIONAL PROCESS CODES OF IN CAPACITY.	R FC	OR DE	SCRIBING	OTHER PROC	ESSES (code	"T04"). FC	OR EACH PROCESS E!	NTERED HERE
				on the same of the	-			• • • • • • • • • • • • • • • • • • • •		-		• ••
			•				:					, i i i i i i i i i i i i i i i i i i i
10-00		٠.		and the second s					•		•	
R												
			•	المعارض والمعارض والم								a a var suu ole ole suureen suureen suureen suureen suureen saatuuri on suureen suuree
			•									
				and the second s								
				en e	_				e a ser en e manuel masses e e e e e e e e e e e e e e e e e	· · · · · · · · · · · · · · · · · · ·	The second secon	المنطقة والماضعة للمعطية المنطية المراجعة المراجعة
P						٠						
**** *****				ing parameters are not to the second of the	•···································		المناج المناج المناد	6 -				and the second s
					• •					•	·	
						• •		·				2 % ÷
				N OF HAZARDOUS WASTE								
hand	tle h	azar	dou	IUS WASTE NUMBER — Enter swastes which are not listed in 4	10 C	FR, S	lubpart D, e					
				oxic contaminants of those hazard								
besi	. Fo	r ea	ch c	NNUAL QUANTITY — For each haracteristic or toxic contaminan								
				et characteristic or contaminant.			0			llain of acc		d and the engagement
	s are		EAS	WRE - For each quantity entere	9G (1	n colui	mn a enter	r the unit of m	esente coder (Units of mes	trie mulcu wast oe ase	and the appropriate
•		1	_	GLISH UNIT OF MEASURE			CODE	-	METRIC UNI			CODE
ľ			-0	unus	• •							Mr.
• .			TO	NS	• •	• • • •	T		METRIC TON	18	• • • • • • • • • • • • • • • • • • • •	K M
of fa	cilit	/ re	TO COPO	NS	for of 1	ouenti	T ity, the uni	its of measure r	METRIC TON	18		M
acco	unt	the	appi	s use any other unit of measure opriate density or specific gravity	for of 1	quanti the wa	T ity, the uni ste.	its of measure r	METRIC TON	18		M
PRO	CES	SES	appi S C	opriate density or specific gravity	of 1	the wa	ste.			erted into one	of the required units a	M of measure taking into
), PRO	CESPACE	SES SES Steri	sppi SCO i ha	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate	of to	rdous (waste enter	red in column a	A select the c	erted into one	of the required units a the list of process codes	M If measure taking into contained in Item III
9000 1. 1	CESPROCE For Income	SES SES ster lica on-	sppi S C(d ha te ho -list d in	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tern III to indicate all the proc	azaı d, a	rdous (nd/or (acteris	waste enter disposed of tic or toxic	red in column if at the facility.	A select the co	erted into one ode <i>(s)</i> from t lumn A, selec	of the required units of the list of process codes at the code/s/ from the	M of measure taking into contained in Item III s list of process codes
PRO	PROCESTOR INC. For In	SES sterilica iner	sppi S C(d ha te ho -list d in acte our	opriate density or specific gravity DDES: zerdous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tern III to indicate all the pro- ristic or toxic contaminant, spaces are provided for entering	azar d, a charc	rdous (nd/or (acteris s that	waste enter disposed of tic or toxic will be use codes. If m	red in column of at the facility. contaminant old to store, training the contaminant old to store are needed	A select the contered in color, and/or dis	erted into one ode (s) from the lumn A, select pose of all the first three	the list of process codes the code/si from the ne non—listed hazardou	of measure taking into a contained in Item III as list of process codes as wastes that possess
9 SCCC	PROCES For life income	SES Sterilica iner iner har	S Co I ha te he -list I in ecte our right	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tern III to indicate all the pro- ristic or toxic contaminant, spaces are provided for entering tox of Item IV-D(1); and (3) En	of to	rdous (nd/or (acteris s that ocess (in the :	waste enter disposed of tic or toxic will be use codes. If m space provi	red in column of at the facility. contaminant of the to store, treated ded on page 4,	A select the content of the color of the col	ode/s) from t lumn A, select pose of all the he first three per and the ac	the list of process codes the code/s/ from the non-listed hazardouses described above; (2) ditional code/s/.	of measure taking into a contained in Item III is list of process codes as wastes that possess?) Enter "000" in the
. PRO 1. 1	PROCEST IN THE PROCES	SES Sterion- iner iner iner iner iner	S C(d hate he list in screen right	opriate density or specific gravity DDES: zerdous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tern III to indicate all the proc ristic or toxic contaminant. spaces are provided for entering tox of item IV-D(1); and (3) En	of to	rdous ond/or ecterists that occass in the s	waste enter disposed of tic or toxic will be use codes. If m space provi	red in column of at the facility. c contaminant of the store, tree are needed ded on page 4, will be used, do	A select the color at, and/or dist: (1) Enter the line numbers of the property	ode(s) from t lumn A, select spose of all the the first three per and the so	the list of process codes to the code/s/ from the non-listed hazardou as described above; (2 iditional code/s/.	of measure taking into the contained in Item III is list of process codes us wastes that possess?) Enter "000" in the form.
PRO 1. !	PROCESTOR IN THE PROCES	SESSECTION OF THE SESSECTION O	S CC i ha te ho list in acte iour right	opriate density or specific gravity DDES: zerdous waste: For each listed how the waste will be stored, treate ad hazardous wastes: For each of tem III to indicate all the prod ristic or toxic contaminant. spaces are provided for entering tox of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list DUS WASTES DESCRIBED BY it Hazardous Waste Number shall be	of the same of the	rdous rdous rdous rdous rdous rdous rdous resteriss that occase rin the rdous	waste enterdisposed of tic or toxic will be use codes. If m space provi	red in column of at the facility. contaminant of the to store, trained are needed ded on page 4, will be used, do EPA HAZARDom as follows:	A select the contered in collect, and/or district the line numbers of the property of the line secribe the line secr	ode(s) from to the pose of all the first three por and the access in the sign.	the list of process codes the code/s/ from the non-listed hazardouses described above; (2 ditional code/s/).	of measure taking into a contained in Item III a list of process codes us wastes that possess and the prim.
PRO 1. ! 2. ! NOTE:	PROCESS PROCES	the SESSESSESSESSESSESSESSESSESSESSESSESSES	S CC that the history is a court of the cour	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tern III to indicate all the proc ristic or toxic contaminant. spaces are provided for entering box of item IV-D(1); and (3) En ESCRIPTION: If a code is not list DUS WASTES DESCRIBED BY if Hazardous Waste Number shall be the EPA Hazardous Waste Number he waste and describing all the ore	of the same of the	rdous rdous rdous rdous rdous rdous restricts that occass refer a page 7 TH scriber and enter to less	waste enter disposed of tic or toxic will be use codes. If m space provi process that an ONE for the for the for the for the toxic to to	red in column at at the facility. It contaminant and to store, treated ded on page 4, will be used, de EPA HAZARDam as follows:	A select the content of the content	ode(s) from to lumn A, select pose of all to the first three por and the select poses in the select poses	the list of process codes to the code/s/ from the ne non-listed hazardou as described above; (2 iditional code/s/. pace provided on the for Hazardous wastes that has B,C, and D by estimates	of measure taking into a contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form.
2. NOTE:	ount : OCES PROCE For II O inconta hat c Note: extre HA an o Select n co	SESSIBLE SES	S CO in ha in had a market by the had a market	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate and hazardous wastes: For each of tern III to indicate all the procristic or toxic contaminant, spaces are provided for entering tox of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list out waste Number shall be the EPA Hazardous Waste Number shall be the EPA Hazardous Waste Number of the next line enter the other th above" and make no other entr	of the state of th	rdous	waste enterdisposed of tic or toxic will be use codes. If m space provier occess that IAN ONE fid on the former it in cobe used to be used to sardous Wast line.	red in column at at the facility. It contaminant and to store, trained and an page 4, will be used, deep HAZARDam as follows: lumn A. On the treat, store, and the Number that	A select the contered in collection at, and/or distance the line numbers of the line collection and line collection dispose of the case of the collection of the collection dispose of the case of the collection of the case of the collection of the case of the collection of the collection of the case of the collection of the colle	ode(s) from to the pose of all the first three per and the access in the selections. NUMBER — mplete column of the waste. To describe	the list of process codes the code/s/ from the non-listed hazardous as described above; (2 dictional code/s/, pace provided on the for Hazardous wastes that has B,C, and D by estimathe waste. In column 5	of measure taking into a contained in Item III a list of process codes us wastes that possess?) Enter "000" in the form.
2. I NOTE: pore tr 1. 3.	OCESPROOF OF THE PROOF OF THE P	SESSISTEM IN THE SESSIS	S CC in ha te he list in acte or right of the court of th	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clem III to indicate all the prodristic or toxic contaminant, spaces are provided for entering box of Item IV-D(1); and (3) En ESCRIPTION: If a code is not listed to the product of the matching of the code waste Number shall be the EPA Hazardous Waste Number of the next line enter the other the above" and make no other entry for each other EPA Hazardous Waste Number shall be waste and describing all the product of the next line enter the other the above" and make no other entry for each other EPA Hazardous Waste Number shall be waste and describing all the product of the next line enter the other the above of the PA Hazardous Waste Number shall be waste and describing all the product of the next line enter the other the above of the PA Hazardous Waste Number shall be stored to the product of the next line enter the other the above.	azai d, a chari esse g pr ter i ted i MOF e der oces EP/ ries (rdous on double of the control of th	waste enter disposed of tic or toxic will be use codes, If m space provi process that IAN ONE I d on the for the rit in co be used to product the color ardous Wes t line, ther that cal	red in column of at the facility. It contaminant is ad to store, tree nore are needed ded on page 4, will be used, do EPA HAZARDom as follows: furn A. On the treat, store, and the Number that in be used to determ the store of	A select the contered in column at, and/or district the line numb escribe the property was a same line coll/or dispose of the can be used scribe the haz	ode(s) from the first three per and the second the seco	the list of process codes of the code(s) from the non-listed hazardous as described above; (2) iditional code(s). pace provided on the found of the hazardous wastes that the mass B,C, and D by estimate waste. In column D	of measure taking into the contained in Item III is list of process codes us wastes that possess?) Enter "000" in the prim. It can be described by nating the total annual 0(2) on that line enter
2. NOTE: more the 1	CESSPROME TO COMMENT OF THE COMENT OF THE COMMENT OF THE COMMENT OF THE COMMENT OF THE COMMENT O	sessions in entity and	S CO has te he list in a cte i	opriate density or specific gravity DDES: zardous waste: For each listed how the waste will be stored, treate and hazardous wastes: For each of tern III to indicate all the procristic or toxic contaminant, spaces are provided for entering tox of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list out waste Number shall be the EPA Hazardous Waste Number shall be the EPA Hazardous Waste Number of the next line enter the other th above" and make no other entr	d, and an azard,	rdous	waste enterdisposed of tic or toxic will be use codes. If m space provierocess that IAN ONE Ed on the former in content of the codes was to line, when that called the codes was to line, when that called the codes was to line, when that called the called	red in column of at the facility. It contaminant is at the facility. It contaminant is at the store, the store are needed ded on page 4, will be used, do EPA HAZARDOM as follows: It will be used to destruct the store, and the store to destruct the store the stor	A select the content of the line numbers of the line of the line content of the line content of the line content of the line of the line content o	ode(s) from to de(s) from to de(s) from to de(s) from to de so de	the list of process codes the list of process codes the code/s/ from the non-listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the code of three non-listed pose pose pose pose pose pose pose pose	contained in Item III elist of process codes us wastes that possess element. It can be described by eating the total annual o(2) on that line enter estimated 900 pounds ed wastes. Two wastes
PRO 1. ! 2. NOTE: nore tr 1 2. XAMII ir yes are cor	PROCESS PROCES	SESSESSESSESSESSESSESSESSESSESSESSESSES	S CC i ha to have the history and have the courright of A CC on the cou	ODES: zerdous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each claim or toxic contaminant. spaces are provided for entering box of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list toxic contaminant especially wastes Number shall be the EPA Hazardous Waste Number shall be the EPA Hazardous describing all the proof the next line enter the other thabove" and make no other entry of the cach other EPA Hazardous Waste Number shall be the state of the next line enter the other of the next line enter the other of the next line enter the other thabove" and make no other entry of the state of t	azai d, a d, a d, a d, a d, a d ter i ted i MOF eers D	rdous	waste enterdisposed of tic or toxic codes. If m space provierocess that IAN ONE Ed on the forter it in cobe used to arrous Wast t line, ber that calbers X-1, X g operation per year.	red in column of at the facility. contaminant cad to store, trainers are needed ded on page 4, will be used, de EPA HAZARDerm as follows: lumn A. On the treat, store, and to Number that n be used to de C-2, X-3, and X-1. In addition, the feach waste. To	A select the content of the line numbers of the line numbers of the line content of the line of the line content of the line c	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non-listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non-lister and dispose of an expose of three non-lister and ignitable and there	contained in Item III elist of process codes us wastes that possess element. It can be described by eating the total annual o(2) on that line enter estimated 900 pounds ed wastes. Two wastes
2. NOTE: more the street of th	OCES PROCE For It to income the control of the cont	SESSIBLE SES	S CC has been been been been been been been bee	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clem III to indicate all the prodristic or toxic contaminant, spaces are provided for entering box of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list to year and year.	of in azard, aza	rdous	waste enter disposed of the or toxic will be use codes. If m space provierocess that IAN ONE I do not the form the company of the code was the code of	red in column of at the facility. It contaminant is at the facility. It contaminant is at the store, tree are needed ded on page 4, It will be used, deep a HAZARDE from as follows: Itumn A. On the treat, store, and the Number that in be used to defect the store, and X-1. In addition, the feach waste. The disposal will be a contaminate for the store in th	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode/s/ from to one ode/s/ from to lumn A, select pose of all to the first three per and the access in the select poses in the select poses. NUMBER — mplete column of the waste. It to describe the cardous waste of access to the select poses. It is the select poses to describe the select poses to the select poses. It is the select poses to the select poses.	the list of process codes of the code/s/ from the non-listed hazardou as described above; (2 iditional code/s/. pace provided on the for Hazardous wastes that has B,C, and D by estimate the waste. In column 5 increat and dispose of an expose of three non-lister and ignitable and there	contained in Item III selist of process codes us wastes that possess better "000" in the form. It can be described by setting the total annual fo(2) on that line enter sestimated 900 pounds and wastes. Two wastes we will be an estimated
2. NOTE: nore the same core 100 po	CCES PROCE For III o inc For II conta hat c Note: extre IX II	SESSIBLE CONTROL OF CO	appliants and a second a second and a second	ODES: zardous waste: For each listed how the waste will be stored, treate and hazardous wastes: For each claim in to indicate all the procristic or toxic contaminant. spaces are provided for entering tox of Item IV-D(1); and (3) Entering the procristic of the IV-D(1); and (3) Entering wastes wastes in the procristic of the IV-D(1); and (4) Entering waste Number shall be the EPA Hazardous Waste Number shall be the EPA Hazardous waste Number and describing all the procrist above" and make no other entry of the next line enter the other thabove" and make no other entry of the standard waste and describing all the procrist above and make no other entry of the next line enter the other thabove" and make no other entry of the standard waste and describing all the procrising in the procrising and there will be an estimated 20 of that waste. Treatment will be	azaid, asthardesse distributed in tention of the desse distributed	rdous	waste enter disposed of the or toxic will be use codes. If m space provierocess that IAN ONE I do not the form the company of the code was the code of	red in column of at the facility. contaminant cad to store, trainers are needed ded on page 4, will be used, de EPA HAZARDerm as follows: lumn A. On the treat, store, and to Number that n be used to de C-2, X-3, and X-1. In addition, the feach waste. To	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non-listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non-lister and dispose of an expose of three non-lister and ignitable and there	if measure taking into incompare taking into incompare taking into incompare taking into incompare taking incompare taking the total annual O(2) on that line enter estimated 900 pounds of wastes. Two wastes will be an estimated
2. NOTE: more the street of th	PROCESS PROCES	SESSESSESSESSESSESSESSESSESSESSESSESSES	appliants and a second a second and a second	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clem III to indicate all the prodristic or toxic contaminant, spaces are provided for entering box of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list to year and year.	azaid, asthardesse distributed in tention of the desse distributed	rdous indicate was reduced in the state of t	waste enter disposed of the or toxic will be use codes. If m space provierocess that IAN ONE I do not the form the company of the code was the code of	red in column of at the facility. It contaminant is at the facility. It contaminant is at the facility. It contaminant is at the facility. It will be used, do the facility of the facility. It will be used, do the facility of the facility	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non—listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non—lister and dispose of an expose of three non—lister and ignitable and ther ESSES	if measure taking into incompare taking into incompare taking into incompare taking into incompare taking incompare taking the total annual O(2) on that line enter estimated 900 pounds of wastes. Two wastes will be an estimated
2. NOTE: pore the same core 100 po	PROCESSES PROCES	SESSION IN THE SESSIO	S C(d has te he list te he list te he courright sour right sour A L NO de)	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clarm III to indicate all the procristic or toxic contaminant. spaces are provided for entering box of item IV-D(1); and (3) En ESCRIPTION: If a code is not list box of item IV-D(1); and list box of item IV-D(2); and make no other entry of the next line enter the other the above" and make no other entry of the reach other EPA Hazardous WOMPLETING ITEM IV (shown in shavings from leather tanning and there will be an estimated 20 of that waste. Treatment will be IV-D(1) and IV-D(1)	azaid, asthardesse distributed in tention of the desse distributed	rdous rdous rdous rdous rdous rdous rdous rdous restricted restric	waste enterdisposed of tic or toxic will be use codes. If m space provier occess that IAN ONE Id on the for inter it in cobe used to ardous Wast I line. bers X-1, X g operation per year onerstor and	red in column of at the facility. It contaminant is contaminant is contaminant is contaminant is contaminant in the second ded on page 4, will be used, deep a HAZARDom as follows: llumn A. On the treat, store, and the Number that he used to defect the second description of the	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non—listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non—lister and dispose of an expose of three non—lister and ignitable and ther ESSES	if measure taking into information of measure taking into information of process codes as wastes that possess in the porm. It can be described by mating the total annual of the control
2. NOTE: pore the state of the	PROCESS PROCES	SESSESSION FOR SESSION FOR SESSION FOR SESSION FOR SESSION FOR SESSION FOR SEPTICAL SESSION FOR SETION FOR SETIO	appliants and a second a second and a second	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of term III to indicate all the procristic or toxic contaminant, spaces are provided for entering tox of Item IV-D(1); and (3) En ESCRIPTION: If a code is not listed to the next line enter the other the above" and make no other enter the above" and make no other enter the other enter the other enter the other waste and there will be an estimated 20 of that waste. Treatment will be the ESTIMATED ANNUAL QUANTITY OF WASTE	azaid, asthardesse distributed in tention of the desse distributed	rdous	waste enterdisposed of tic or toxic will be use codes. If m space provier occess that IAN ONE Id on the for inter it in cobe used to ardous Wast I line. bers X-1, X g operation per year onerstor and	red in column of at the facility. It contaminant is at the facility. It contaminant is at the store, treated ded on page 4, will be used, do the store, and the Number that is addition, the feach waste. It disposal will be the store, and the store	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non—listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non—lister and dispose of an expose of three non—lister and ignitable and ther ESSES	if measure taking into incompare taking into incompare taking into incompare taking into incompare taking incompare taking the total annual O(2) on that line enter estimated 900 pounds of wastes. Two wastes will be an estimated
2. NOTE: pore the same core 100 po	PROCESSOR TO THE PROCES	SESSION IN THE SESSIO	S C(d has te he list te he list te he courright sour right sour A L NO de)	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clarm III to indicate all the procristic or toxic contaminant. spaces are provided for entering box of item IV-D(1); and (3) En ESCRIPTION: If a code is not list box of item IV-D(1); and list box of item IV-D(2); and make no other entry of the next line enter the other the above" and make no other entry of the reach other EPA Hazardous WOMPLETING ITEM IV (shown in shavings from leather tanning and there will be an estimated 20 of that waste. Treatment will be IV-D(1) and IV-D(1)	azaid, asthardesse distributed in tention of the desse distributed	rdous rdous rdous rdous rdous rdous rdous rdous restricted restric	waste enter disposed of the or toxic will be use codes. If m space provierocess that IAN ONE I do not the form	red in column of at the facility. It contaminant is contaminant is contaminant is contaminant is contaminant in the second ded on page 4, will be used, deep a HAZARDom as follows: llumn A. On the treat, store, and the Number that he used to defect the second description of the	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes the list of process codes the code/s/ from the non—listed hazardou as described above; (2 iditional code/s/. pace provided on the form the waste. In column the waste. In column the waste. In column the code of three non—lister and dispose of an expose of three non—lister and ignitable and ther ESSES	if measure taking into information of measure taking into information of process codes as wastes that possess in the porm. It can be described by mating the total annual of the control
2. NOTE: nore ti 1 2 XAMI r yes are cor 70 po	PROCESS PROCES	SES State of the Follows of the Foll	S C C in A in a c c c c c c c c c c c c c c c c c c	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each of tem III to indicate all the prodristic or toxic contaminant. spaces are provided for entering box of Item IV-D(1); and (3) En ESCRIPTION: If a code is not list out waste Number shall be the EPA Hazardous Waste Number shall be the waste and describing all the proof the next line enter the other th above" and make no other entry of the reach other EPA Hazardous Waste Number shall be the waste and describing all the proof the next line enter the other the above" and make no other entry of the reach other EPA Hazardous Waste Number shall be an estimated 20 of that waste. Treatment will be B. ESTIMATED ANNUAL QUANTITY OF WASTE	azaid, asthardesse distributed in tention of the desse distributed	rdous indicate was reduced in the secretary and en	waste enter disposed of the or toxic will be use codes. If m space provierocess that IAN ONE I do not the form	red in column of at the facility. It contaminant is at the facility. It contaminant is at the store, tree are needed ded on page 4, will be used, deep a HAZARDE from as follows: flumn A. On the treat, store, and the Number that the Number that is a solid to defect the store, and the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store that the store is disposal will be a store that the store th	A select the contered in column at, and/or distant the line numb escribe the property of the line column at	ode(s) from to de(s) from to de(s) from to de so	the list of process codes of the code/s/ from the non-listed hazardou as described above; (2) Iditional code/s/. pace provided on the form Hazardous wastes that the waste. In column the waste. In column the waste of three non-lister and ignitable and theres.	in the state of th
2. NOTE: pore ti 1. 1. 2. 3. XAMIII yes are cor 70 po	PROCESS PROCES	SESSESSESSESSESSESSESSESSESSESSESSESSES	S C(d has te his	ODES: zardous waste: For each listed how the waste will be stored, treate ed hazardous wastes: For each clem III to indicate all the procristic or toxic contaminant, spaces are provided for entering box of item IV-D(1); and (3) En ESCRIPTION: If a code is not list to ESCRIPTION: If a code is not list to EPA Hazardous Waste Number shall be the EPA Hazardous Waste Number to the next line enter the other th above" and make no other entry of the next line enter the other than the enter that the enter that the enter that the enter that all the process of the next line enter the other than the enter that the enter that all the process of the next line enter the other than the enter that all the process of the enter that all the process of the next line enter the other than the enter that all the process of the enter than the enter than the process of the enter than the	azaid, asthardesse distributed in tention of the desse distributed	rdous indicate was reduced in the secretary and en	waste enterdisposed of tic or toxic will be use codes. If m space providerocess that incomparation was to line. The code of th	red in column of at the facility. It contaminant is at the facility. It contaminant is at the store, tree are needed ded on page 4, will be used, deep a HAZARDE from as follows: flumn A. On the treat, store, and the Number that the Number that is a solid to defect the store, and the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store is disposal will be a store that the store that the store is disposal will be a store that the store th	A select the content of the content	ode(s) from to de(s) from to de(s) from to de so	the list of process codes of the code/s/ from the non-listed hazardou as described above; (2) Iditional code/s/. pace provided on the form Hazardous wastes that the waste. In column the waste. In column the waste of three non-listers and ignitable and there is and ignitable and there is a code is not enter included with	in the state of th

continued from page 2. NOTE: Photocopy this page before completing if you have more than 26 wastes to list. Form Approved OMB No. 158-S80004 FOR OFFICIAL USE ONLY DUP DUP IV. DESCRIPTION OF HAZARDOUS WASTES (continued) C. UNIT OF MEA-SURE (enter code) D. PROCESSES A. EPA HAZARD. WASTE NO B. ESTIMATED ANNUAL QUANTITY OF WASTE HAZARD. WASTENO (enter code) 1. PROCESS CODES (enter) 2. PROCESS DESCRIPTION (If a code is not entered in D(1)) 29 27 - 29 27 Most of pure water evaporates 8,000,000 P 0 4 plolol

Continued from the Wort,	<u> </u>					200	
IV. DESCRIPTION OF HAZARDOUS WAST (co	ntinued)	Charles and the second	o co				Σ
E. USE THIS SPACE TO LIST ADDITIONAL PRO	CESS CODES FROM ITEM D	I) ON PAGE 3.		المنتسد الراء الم			_
	, , , , , , , , , , , , , , , , , , , ,						
The state of the s	-	•					
		. •					
					•		
The second secon							
				-	-		
						ستعييها ال	
	. منسب			*	ı		
			•				
					,		
a service on the service of						man comment of the con-	
				•			
EPA I.D. NO. (enter from page 1)	•				-		
HT X D O O O 7 2 9 O 2 O 17 5							
17 (4)							a Co
V. FACILITY DRAWING	《自己的》中心,有些的知识。						\equiv
All existing facilities must include in the space provided on	page 5 a scale drawing of the facilit	(see instructions for mor	e de tail).		30.674	-
VI. PHOTOGRAPHS				-			200
All existing facilities must include photographs (aer	ial or ground—level) that clearly	delineate all existing s	tructu	res; exis	ting stor	age,	
treatment and disposal areas; and sites of future sto	rage, treatment or disposal area	s (see instructions for n	ore d	etail).			C. Pr
VII. FACILITY GEOGRAPHIC LOCATION							er. Bas
LATITUDE (degrees, minutes, & second	"	LONGITUDE (degree	s, mini	ites, & se	conds)		
31 4 3 0 5	and the same of the contrast o	1 0 2 1	4 9	10			-
25 46 27 48 48 - 71		78 - 74	15 74	77 - 79	1		-
VIII. FACILITY OWNER							4
A. If the facility owner is also the facility operator as	listed in Section VIII on Form 1, "(ioneral Information", plac	e an ">	(" in the	box to the	e left and	
skip to Section IX below.		•					
S. If the facility owner is not the facility operator as	issed in Section VIII on Form 1, co	notete the following item	R:				
es it are legality owner to the first are legality operator as		Mareta and removing room					
1. NAME OF FACI	LITY'S LEGAL OWNER		1	. PHONE	NO. (ere	e code & na.	,
en e				1 I LI	1 1		
TV.			88 84		12 - 61		**
3. STREET OR P.O. SOX	4. CITY O	RTOWN	B. ST.		6. ZIP C	ODE	
	Ğ					T	
	13 13 19	• 40	41 42	-	لبلا	4.4	
IX. OWNER CERTIFICATION						AND SECTION ASSESSMENT	77
certify under penalty of law that I have personally					-		ì
documents, and that based on my inquiry of those i	examined and am familiar with	the information subm	tted i	n this an	d all area	chad	
	ndividuals immediately respons	ible for obtaining the ir	forma	ition, I b	elieve th	at the	
ubmitted information is true, accurate, and comple including the possibility of fine and imprisonment.	ndividuals immediately respons	ible for obtaining the ir	forma	ition, I b	elieve th	at the	
ubmitted information is true, accurate, and comple including the possibility of fine and imprisonment.	ndividuals immediately respons te. I am aware that there are sig	ible for obtaining the ir	oforma ibmitt	tion, I b	elieve the informa	at the	
ubmitted information is true, accurate, and comple including the possibility of fine and imprisonment.	ndividuals immediately respons	ible for obtaining the ir	c. b.	ntion, bring false	pelieve the informa	at the tion,	
ubmitted information is true, accurate, and comple including the possibility of fine and imprisonment. NAME (print or type) DLAND E. MOORE, VICE PRESIDENT &	ndividuals immediately respons te. I am aware that there are sig	ible for obtaining the ir	c. b.	ntion, bring false	pelieve the informa	at the tion,	
ubmitted information is true, accurate, and compleincluding the possibility of fine and imprisonment. NAME (print or (yps)) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER	ndividuals immediately respons	ible for obtaining the ir	c. D.	ntion, I b ing false	elieve the informa	at the tion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION	ndividuals immediately respons	ible for obtaining the innificant penalties for s	c. D	ntion, I bing false	elieve the informa	at the stion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally	ndividuals immediately respons te. I am aware that there are sign augustum Company Company Examined and am familiar with	ible for obtaining the innificant penalties for so	G. D.	ntion, I bring false	elieve the information of the in	at the stion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally	ndividuals immediately respons te. I am aware that there are sign augustum Company Company Examined and am familiar with	ible for obtaining the innificant penalties for so	G. D.	ntion, I bring false	elieve the information of the in	at the stion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally	ndividuals immediately respons te. I am aware that there are sign augustum Company Company Examined and am familiar with	ible for obtaining the innificant penalties for so	G. D.	ntion, I bring false	elieve the information of the in	at the stion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally	ndividuals immediately respons te. I am aware that there are sign augustum Company Company Examined and am familiar with	ible for obtaining the innificant penalties for so	G. D.	ntion, I bring false	elieve the information of the in	at the stion,	50
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or (ype) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally	ndividuals immediately respons te. I am aware that there are sign augustum Company Company Examined and am familiar with	ible for obtaining the innificant penalties for so	c. D.	ntion, I bring false	elieve the information of the in	at the stion,	
ubmitted information is true, accurate, and complete including the possibility of fine and imprisonment. NAME (print or type) DLAND E. MOORE, VICE PRESIDENT & CHIEF ENGINEER X. OPERATOR CERTIFICATION certify under penalty of law that I have personally documents, and that based on my inquiry of those is submitted information is true, accurate, and complete including the possibility of fine and imprisonment.	examined and am familiar with ndividuals immediately responsite. I am aware that there are significant that the significant that	ible for obtaining the innificant penalties for so	c. D.	ntion, I be ATE SIGN ATE SIGN ATE SIGN ATE SIGN In this an ation, I be	elieve the information of the in	at the stion,	

PAGE 4 OF 5

CONTINUE ON PAGE 5

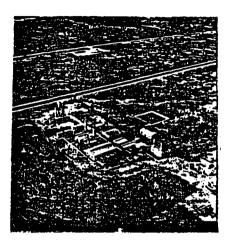
PA Form 3510-3 (6-80)

V. FACILITY DRAWING (see page 4)

E.P.A.ID: TXD000729020

E.P.A.ID: TXD000729020

ATTACHMENT



Aerial Photograph of Transwestern's Halley Plant

This photograph was taken around 1976. Should this photograph be insufficient, please advise.

2 1:00

PA C

				T/A C
			W	13 14 13
IX. DESCRIPTION	OF HAZARDOUS WASTES (co	ntinued from front)	TANK TO THE STATE OF THE STATE	ta a a tutti da la tala.
	TES FROM NON—SPECIFIC SOURCE sources your installation handle	CES. Enter the four—digit number from its Use additional sheets if necessary.	m 40 CFR Part 261.31 for each	listed hazardous
. 77.	2	3 4	5	6
23 26	23 26 23		23 - 26 2:	
7	│ 	10	 	12
23	23 26 27		23 26 2	
B. HAZARDOUS WAS	TES FROM SPECIFIC SOURCES. E	Enter the four-digit number from 40 C		
	urces your installation handles. Use a			
13		15 16	17	18
23 25 26	23 - 26 23-	28 28 28		26
19	20	21 22	23 25 2	24
23 - 26	23 - 26 23		23 - 26 2	
25	26	27 28	29	30
23 26				
C. COMMERCIAL CH		WASTES. Enter the four-digit number		each chemical sub-
stance your installat	ion handles which may be a hazardou	us waste. Use additional sheets if necess	sary.	
31	32	33 34	35	36
23 - 26				3 26
37	38	39 40	41	42
				7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
23 26	23 - 26 23		, \	13 - 26
43	44	45 46	47	48
	23 2 2 3 5			
D. LISTED INFECTIO	US WASTES. Enter the four-digit n	number from 40 CFR Part 261.34 for ea	ach listed hazardous waste from	hospitals, veterinary
hospitals, medical a	nd research laboratories your installat	tion handles. Use additional sheets if ne	ecessary.	
49	50 (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	. 51 Grangenay 52	53	54
23 - 26	23 26 26	28 28 28		
E. CHARACTERISTIC	S OF NON-LISTED HAZARDOUS	WASTES. Mark "X" in the boxes corr	responding to the characteristics	of non-listed
hazardous wastes yo	our installation handles. (See 40 CFR	Parts 261.21 - 261.24.)		
☐1. IGN (D001)		RROSIVE 3. REA	CTIVE 4	. TOXIC
X. CERTIFICATIO		245000000000000000000000000000000000000	NEW PROPERTY AND	
, ,	•	ally examined and am familiar wi	th the information submitte	ed in this and all
attached documen	ts, and that based on my inquir	ry of those individuals immediatel	y responsible for obtaining	the information.
I believe that the somitting false inform	submitted information is true, a nation, including the possibility of	ccurate, and complete. I am awar of fine and imprisonment.	e that there are significant	penalties for sub-
SIGNATURE		NAME & OFFICIAL TITLE (type of	r print) DA	TE SIGNED
		WILLARD T. YOUNG	- "	
	·	MANAGER, ENVIRONMENTAI	L PROTECTION	
EPA Form 8700-12 (6-	80) REVERSE			

Form Approved OMB No. 158-\$79016

CONTINUE ON REVERSE

A 18 18

		•				T	1
					$\overline{\mathbf{w}}$] [
IX. DE	SCRIPTION OF H	AZARDOUS WAST	ES (continued from	front)		- 13 [14] 10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
A. HAZ	ARDOUS WASTES	ROM NON-SPECIFIC	SOURCES. Enter the	four-digit number from	n 40 CFR Part 261.31 fo		1 .
waste	from non—specific	sources your installation	handles. Use addition	al sheets if necessary.			
		2	3	4	5	6	1 1
					- 1 1 1 1		
	29 - 26	23 - 26	21 : 26	23 - 26	23 - 26	12	>
	 	Hi	 	 	 	<u> </u>	P.
•	23 26	23 26			23 26		S
B. HAZ	ARDOUS WASTES	ROM SPECIFIC SOUR	CES. Enter the four-	digit number from 40 Cl	R Part 261.32 for each i	isted hazardous waste from	 -
. specif	fic industrial sources	your installation handle	s. Use additional sheet	ts if necessary.]
	13	14	15	16	17	18	1
							~
	19	20 - 26	23 - 26	23 - 26	23 - 26	23 - 26	×
							100
	23 26	23 2 26	23 - 26	23 - 26	23 - 26	23 - 26	1
	25	26	27	28	29	30	
•							
0.0014	23 - 26	23 - 28	23 - 26	23 : 26	23 - 26	23 - 26	- [
C. COM	MERCIAL CHEMIC a your installation ha	at PRODUCT HAZAR andles which may be a h	DOUS WASTES. Ente azardous waste. Use a	er the tour—digit number dditional sheets if necess	trom 40 CFH Part 261.3 ary.	3 for each chemical sub-	
	31	32	33	34	35	36	١,
	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 24	Ø
	37	38	39	40	41	42	
•	43	23 - 26	23 - 26 45	46	23 - 26	23 - 26 48	
;							
	23 24	23 - 26	23 25	23 26	23 26	23 - 26	ت
						from hospitals, veterinary	15
hospi	itals, medical and res	earch laboratories your	installation handles. U	se additional sheets if ne	cessary.		-
	49	50	51	52	53	54	
E. CHAI	RACTERISTICS OF	NON-LISTED HAZAF	RDOUS WASTES. Mai	rk "X" in the boxes corr	esponding to the characte	eristics of non-listed	1 3
hazar	rdous wastes your ins	tallation handles. (See	40 CFR Parts 261.21 -	- 261.24.)			\ 0
	☐1. IGNITAE		2. CORROSIVE	□3. REA	CTIVE	4. TOXIC	3
 	(D001)	(DC))02)	(D003)	and regarded his new last services	(D000)	
	RTIFICATION	新加州	Who Charles and The Brance			发现和企业的证明。	D .
[certi	ify under penalty	of law that I have	personally examined	d and am familiar with	th the information su	bmitted in this and all ining the information,	ETACHA
I belie	eve that the subm	itted information is	true, accurate, and	complete. I am aware	that there are signif	icant penalties for sub-	Ξ.
mittin	ig false informatio	n, including the possi	bility of fine and im	prisonment.	· ,	•	
GNAT	URE	· · · · · · · · · · · · · · · · · · ·		FICIAL TITLE (type or	print)	DATE SIGNED	7 F
				T. Young	1 Dunatastissa	ŀ	5
سيداكين			rianager	, Enyironmenta	rotection		
PA For	rm 8700-12 (6-80)	REVERSE					1

TV DEC	COURTION OF THE	A DOOLLO WAS	755 / · · · · · · · · · · · · ·		A STATE OF THE STA	CONTRACTOR		
_			TES (continued from f					
A. HAZARDOUS WASTES FROM NON—SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261,31 for each listed hazardous waste from non—specific sources your installation handles. Use additional sheets if necessary.								
	i	2	3	. 4	5	6		
·								
	29 - 26	133 - 14	23 26	23 26	23 - 26	 		
	7	8	9	10	11	12		
								
l								
	23 · 20	15 . 16	23 - 26	23 - 26	22 25	23 - 26		
			les. Use additional sheets		A Part 261,32 for each	listed hazardous waste from		
"	13	14	15	16	17	18		
ŀ								
	123	27 28	23 - 28	23 - 26	23 - 26	22 26		
	19	20	21	22	23	24		
1								
l	25 20	26	27	28	29	30		
l			 	* 		 		
l								
	25 26	27 26	27 26	23 25	123	72 - 10		
			RDOUS WASTES. Enter hazardous waste. Use add			33 for each chemical sub-		
	31	32	33	34	35	36		
•	D 0 1 1	0012						
1	P[0]1 1	P 0 1 2	23 29	23 - 26	23 - 26	23_ 26		
}	37	38	39	40	41	42		
1				1.11				
	23	23 26	23 . 26	23 : 26	23 25	23 24		
l	43	44	45	46	47	48		
	28	23 - 26	25 - 26	23 - 46	23 - 26	23 . 26		
			r-digit number from 40 (r installation handles. Use			e from hospitals, veterinary		
	49	30	31	52	53	54		
E. CHAR	ACTERISTICS OF NO	N-LISTED HAZA	ARDOUS WASTES. Mark	"X" in the boxes corre	sponding to the characte	eristics of non-listed		
	lous wastes your installa			261.24.)		_		
	1. IGNITABLE	(0	2. CORROSIVE	☐3. REAG (D993)	TIVE	∑ 4. TOXIC (D000)		
Y CER	TIFICATION		e de la constante de la consta	The section of		THE RESERVE AND LOUIS		
		The state of the s						
						bmitted in this and all		
I heliev	ed documents, and the that the submitted	nui vuseu on m d information is	y inquiry of inose inui- true, accurate, and co	molete. I am aware	that there are signifi	ining the information, icant penalties for sub-		
mitting	false information. in	cluding the pos	sibility of fine and imp	risonment.				
				CIAL TITLE (LYDE OF F	Print)	DATE SIGNED		
SIGNATI	" / / / / / / / / / / / / / / / / / / /				•	JATE SIGNED		
$ \cdot $	LUXTET 100	C 12	Willard T	. Young, Mgr.	Env. Control	8/18/90		
\ \						1-/10/00		
EPA Poct	n 8700-12 (6-60) REV	ERSE						
		1.1				•		

NOTICE OF REGISTRATION (CL.TINUED)
REGISTRATION NUMBER: 32154
COMPANY NAME: TRANSWESTERN PIPELINE CO.

II. SHIPPING/REPORTING: PURSUANT TO TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWN PERTAINING TO INDUSTRIAL SOLID WASTE MANAGEMENT, ISSUANCE OF MANIFESTS AND MONTHLY REPORTING ARE REQUIRED FOR OFF-SITE STORAGE/PROCESSING/DISPOSAL OF THE FOLLOWING CLASS I WASTES LISTED IN PART I.

PREPARE A MONTHLY WASTE SHIPMENT SUMMARY AND SUBMIT IT ALONG WITH THE GREEN COPY OF THE MANIFEST(S) FOR EACH MONTH THAT SHIPMENTS OF THE FOLLOWING WASTE(S) ARE MADE. NO MONTHLY WASTE SHIPMENT SUMMARY IS REQUIRED FOR MONTHS WHEN SHIPMENTS ARE NOT MADE.

201 902730 NATURAL GAS CONDENSATE CONTAIN ING HEAVY METALS

III. ON-SITE WASTE MANAGEMENT FACILITIES:

NO. FACILITY	STATUS
·	
1 TANK (SUB-SURFACE)	ACTIVE
STORAGE	
OF WASTE NUMBER(S) 001	
CAP-NOT GIVEN	
2 SURFACE IMPOUNDMENT	ACTIVE
STORAGE	
OF WASTE NUMBER(S) 002	
3 LANDFILL	ACTIVE
DISPOSAL	
OF WASTE NUMBER(S) 003	•
1	TANK (SUB-SURFACE) STORAGE GF WASTE NUMBER(S) 001 CAP-NOT GIVEN SURFACE IMPOUNDMENT STORAGE OF WASTE NUMBER(S) 002 LANDFILL DISPOSAL

UNLESS OTHERWISE STATED ABOVE, FACILITIES ARE LOCATED
AT 15 MI W OF KERMIT OFF HWY 302, HALREY RD, POB 1059
COUNTY OF WINKLER

IV. RECORDS.

A. FOR PURPOSES OF FILING ANNUAL REPORTS PURSUANT TO TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWN PERTAINING TO INDUSTRIAL SOLID WASTE MANAGEMENT, RECORDS SHOULD BE MAINTAINED FOR STORAGE, PROCESSING AND/OR DISPOSAL OF THE FOLLOWING WASTE(S) LISTED IN PART I:

CO1 902730 NATURAL GAS CONDENSATE CONTAIN ING HEAVY METALS

_Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

GSA No. UZ46-EPA-OT

				<u> </u>		
IX. DE	SCRIPTION OF HAZ	ARDOUS WASTES	(continued from	front)	entant in the same	and the state of
	ARDOUS WASTES FRO from non—specific sour				1 40 CFR Part 261.31 for	each listed hazardous
	1	2	3	. 4	5	8
	7	23 · 16	9	26	11	12
		 	 	10		
					. []]	
	27 - 10	27 26	27 20	23 - 26	27 - 26	23 - 26
specif	ic industrial sources you	r installation handles.	S. Enter the four—d Use additional sheets	igit number from 40 CF if necessary.	H Part 251.32 for each li	sted hazardous waste from
, ,	13	14	15	16	17	18
	33 - 28	27 24	25 26	29	25 - 26	23 - 26
	19	20	21	22	23	24
	25	26	27	28	29	30
	23	40	1 1 1 1		29	- 30
C COM	25 - 26	25 26	17 · · · · · · · · · · · · · · · · · · ·	27 - 26	from 40 CFR Part 261.33	23 16
	your installation handle					or each chemical sub-
•	31	32	33	34	35	36
	23 26	23 - 26	23 - 26	23 - 26	₹3 · 26	22 - 26
	37	38	39	40	41	42
				6.		
	22 - 26	23 - 39	23 - 26	23 :6	23 - 30	23 - :6
	43	44	45	46	47	48

	19: 26	23 - 26	23 26	23 - 26	23 - 16	23 25
	D INFECTIOUS WAST					from hospitals, veterinary
	49	50	31	52	53	54
	RACTERISTICS OF NO				sponding to the character	istics of non-listed
	_	_	•		•	
	X 1. IGNITABLE	2 {D002	. CORROSIVE			[X] 4. TOXIC
X. CER	TIFICATION	ALCOHOL: N	and the second second			STATE AND THE
I certi	fy under penalty of	law that I have ner	rsonally examined	and am familiar with	the information sub	mitted in this and all
attache	ed documents, and t	hat based on my in	quiry of those ind	ividuals immediately	responsible for obtain	ning the information,
					that there are signific	cant penalties for sub-
mitting	z false information, ir	iciuding the possibil	ity of fine and imp	risonment.		
SIGNAT	URE (P	7. 1. 1. 1.	NAME & OFF	ICIAL TITLE (type or)	Print)	DATE SIGNED
1	Jeela The	24	Willard 1	T. Young, Mgr.	Env. Control	8/18/80
EDA Es-	2700-12 (6 00) 1951	EDCEI				1 / 1
SEM FOR	m 8700-12-(6-80)\REV	-,136				

IX. DESCRIPTION OF HAZ	ARDOUS WASTES	continued from fron		Zielen auf versch	veta resident	- T
A. HAZARDOUS WASTES FRO waste from non—specific sour	M NON-SPECIFIC SO	URCES. Enter the four-	digit number from 40	CFR Part 261.31 for	each listed hazardous	نستني
23 - 24 7 7	2 23 - 76 8	3 	10 122 · 26	23 - 24 11	12	,
B. HAZARDOUS WASTES FRO specific industrial sources you				art 261.32 for each lis	ted hazardous waste f	ram
13 32 - 28 - 19 - 26 - 25 - 26 - 25	20 20 25 26	15 21 27 · 20 27 27 27	16	23 - 26 23 23 - 26 29	18 21 - 16 24 23 - 26 30	
C. COMMERCIAL CHEMICAL F stance your installation handle				n 40 CFR Fart 261.33	for each chemical sub	 -
31 23 - 26 37 23 - 26 43 23 - 26	32 33 - 25 38 23 - 26 44	23 · 26 39 213 · 26 42 42 123 · 26	34 23 - 26 40 6.	23 - 26 41 47 47 23 - 26	36 33 · 26 42 33 · - 26 48 48	
O. LISTED INFECTIOUS WAST hospitals, medical and research					rom hospitals, veterin	ary
E, CHARACTERISTICS OF NO	23 - 16	21 · 26	52 33 - 26	53	34	
hazardous wastes your installa	tion handles. (See 40 Ca	FR Parts 261.21 — 261	24.)	•		
1. IGNITABLE	2. ((D002)	CORROSIVE	U3. REACTIV	(5	X 4. TOXIC 2000)	
I certify under penalty of attached documents, and to I believe that the submitted mitting false information, in	hat based on my inqui I information is true.	uiry of those individu accurate, and comp	uals immediately res lete. I am aware tha	e information subn ponsible for obtain	ing the informatio	n,
SIGNATURE HE	C = 4 2 2		Young, Mgr. En		B/18/80	
EPA Form-8700-12 (6-80) / REV	ERSE					

!

		€.		• (W	1 1 1 1 1			
IX. DES	CRIPTION OF HAZ	ZARDOUS WASTE	S (continued from f	ront)					
A. HAZAROOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.									
	1	2	3	. 4	5	6			
	7	23 - 26	9	10	23 - 26	12			
			CES. Enter the four—di Use additional sheets		R Part 261.32 for each I	isted hazardous waste from			
	13	14	15	16	17	18			
			23 20	•	23 . 35	23 - :6			
-	19	20	21	22	23	24			
	22 24	23 . 20	27 . 26	23	23 . 26	23 - 25			
	25	26	27	28	29	30			
	21 25	25 26	25 26	23 26	27 - 24	25 . 24			
		PRODUCT HAZARD		the four—digit number fitional sheets if necessa		3 for each chemical sub-			
	31	32	33	34	35	36			
	23 - 26	23 - 26	23 - 26	23 - 24	23 - 26	23 . 26			
	37	38	39	40	41	42			
	23 - 26	33 - 35	23 - 28	23 - 26	23 - 26	23 - 26			
	43	44	45	46	47	46			
	23 - 26	33 - 26	23 - 26	25 - 26	23 - 15	23 - 26			
D. LISTE hospit	D INFECTIOUS WAS als, medical and research	TES. Enter the four— th laboratories your in	digit number from 40 (stallation handles. Use	OFR Part 261.34 for eac additional sheets if nec	h listed hazardous waste essary.	from hospitals, veterinary			
	49	50	51	52	53	34			
	23 - 26	23 - 26	23 - 26	23 - 26	23 26	23 : 26			
E. CHAR	ACTERISTICS OF NO lous wastes your install	N-LISTED HAZARI ation handles. <i>(See 4</i>)	DOUS WASTES. Mark O CFR Parts 261.21 — 2	"X" in the boxes corres 261:24.)	sponding to the characte	ristics of non—listed			
	X 1. IGNITABLE	(000	2. CORROSIVE (2)	☐3. REAC (D003)		□ 4. TOXIC (0000)			
X. CER	TIFICATION								
attache I belier	ed documents, and to we that the submitte	that based on my i d information is tr	nguiry of those indi	ividuals immediately omplete. I am aware	responsible jor obtai	omitted in this and all ining the information, cant penalties for sub-			
SIGNATU	JRE \ . (/	î	NAME & OFF	CIAL TITLE (type or p	rint)	DATE SIGNED			
	hickery	forest .	Willard T	. Young, Mgr.	Env. Control	8/18/80			

TEXAS © EASTERN Transmission Corporation

WILLARD T. YOUNG
MANAGER
ENVIRONMENTAL CONTROL
ENGINEERING SERVICES DIVISION

August 20, 1981 OUR REF: 467-81

Mr. Dwight Corley EPA Region VI 1201 Elm Street Dallas, TX 75270

Dear Mr. Corley:

Please find attached a revised EPA Part A Hazardous Waste Permit Application for Transwestern Pipeline Company's Puckett Plant (EPA I.D. Number TXD095437216).

In accordance with Section 122.23 of EPA's Consolidated Permit Regulations, we are submitting the revised application due to laboratory waste analysis results. Chromium was suspected to be present in the cooling tower blowdown impoundment in an amount greater than the EP toxicity level and therefore was identified on the initial application. After the initial application was submitted, laboratory analysis performed by Aqualab of Austin, Texas indicated acceptable chromium levels at this facility. However, selenium was found to be present in an amount greater than the EP toxicity level. The revised application reflects these laboratory results and identifies selenium (EPA hazardous waste Number DO10) as a hazardous waste generated by this facility.

The process design capacity for the cooling tower blowdown impoundment is changed in the revised application from one million gallons to 500,000 gallons due to an error in the original calculation of the volume.

If there are any questions concerning this submittal, please contact Anita Cuevas at 713/759-5318.

Very truly yours.

anager, Enveronmental Protection

1201880

ANC/jc Attachments

bcc: Stirling Dougherty - w/attachments

Dr. D. H. France

W. G. Marks George Moe

G. H. Walker - w/attachments

(fili∸in areas	r type in the unshaded are spaced for elite typ	areas o e, i.e.,	2 c cters/i		الميسان								r#			d OMB N			1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
FORM	EPA	HA	ZARDOUS		ST	ΕP	ER	МΙΤ	T AP					EPA		NUMBE 0 9 5	4 3	7 /	2 1	6	14 E
RCRA	/ L=1 / \		his informatio											1 1 1		بلل				-12	ښل
FOR OFFICATION	DATE RECEIVED		的是他们的	A PORT	S. C. S.	2.3-			ते प्रार्थः -	-		OMMEN.		K KA	n nil						
										,											
	R REVISED APPL				_		•			_						1-17-0-					بري افت
revised applic EPA I.D. Nur	in the appropriate box ation. If this is your fi mber in Item I above.	irst app	lication and yo	ou aire:	ady	kno	w yo	ur fa	cility	vhe 's E	ther t PA I.	his is the D. Numb	first app er, or if t	lication his is a	n you a revised	re submit I applicat	iting fo	r you	ur tac our fa	ility Scilit	or a /'\$
	APPLICATION (place) XISTING FACILITY (See inst		finitic						<i>.</i>			Ç] 2.NE	W FAC	ILITY (C	FOR	NEW	FAC	ILIT	IES.
8 72 74	OPE	RATIO	ING FACILIT N BEGAN OF see to the left)	TIES, P	PRO'	VID C	E TH	IE D	ATE	(yr.,	, mo.,	& day) Menced	, F	Ĭ.	M 0.	DAV	(yr., i	VIDE no., d I BEG ECTE	day An	OP!	ERA S
B. REVISE	D APPLICATION () ACILITY HAS INTER			nd com	plet	e It	em I	abou	e)				Ę] 2. F/	ACILIT	Y HAS A	RCR	A PEI	RMIT		
III. PROCE	SSES – CODES AN	D DE	SIGN CAPA	CITIE	S	- 2		Tre	ر - 's		. whi	1 - N	and the	7.5 40	430	DE VENEZA	7 A T	17		7 . .	
entering of describe to the service of the service	S CODE — Enter the co codes. If more lines are the process (including its S DESIGN CAPACITY JNT — Enter the amou OF MEASURE — For	needed by design — For the nt. each an	d, enter the con or capacity) in sach code ente nount entered	de <i>(s)</i> in the spa red in in colu	n the sce p colu	spa rovi Imn B(1)	ice pi ided (A en), ent	rovid on th iter t ter th	led. Ine for the ca the cox	fag m <i>(l</i> paci	tem	s will be ///-C/. the proc	used tha	t is no	t includ	ed in the	list of	code	s belo	w, th	
measu	re used. Only the unit	PRO- CESS	esure that are (APPROPRI MEASURE	ATE I	וואט	rs c	F	be u	sed.						PRO- CESS	APPR MEAS					
	PROCESS	CODE	DESIG				-					ROCESS	<u> </u>		CODE		SIGN				_
TANK WASTE PII	ER (barrel, drum, etc.) LE IMPOUNDMENT	\$01 \$02 \$03 \$04	GALLONS (GALLONS (CUBIC YAR CUBIC MET GALLONS (DR LIT	ren: R	5				IK IFA	CE II	APOUNE OR ^	MENT	•	T01 T02 T03	GALLO LITER! GALLO LITER! TONS! METRI GALLO	S PER NS PE S PER PER H C TOP	DAY DAY OUR IS PE	AY O	R DUR:	
INJECTION LANDFILM LAND APP OCEAN DI	PLICATION	D79 D80 D81 D82 D83	GALLONS (ACRE-FEET would cover depth of one HECTARE-FACRES OR GALLONS F LITERS PEI GALLONS (the i	olui ere to OR R ARE	ne t o s :S o R	hat		ther proc surfi ator	mai esse ace s. L	or bi s not impo escri	ological (occurring undment be the pr	nical, cher treatment ig in tank s or incin cocesses it tem III-C.	t s, er-	T04	GALLO LITERS	S PER	HOU R D	R AY O		
UNIT OF M	AE A CLIDE	UNI*	SURE	UNIT	. OE	WE	ACI	DE.				JNIT OF EASURI CODE		1 15:47	T OE M	EASURE	•		M	NIT EASU COD	JRE
GALLONS LITERS. CUBIC YA CUBIC ME GALLONS EXAMPLE F	RDS	EM III	E L Y C U (shown in line	LITE TON: MET GALI LITE	RS I S PE RIC LON RS I	PER R H TOI IS PI PER	DAY NS PI ER H HOU	Y	IOUR R	 	A faci	V D W E M	– wo store	ACR HEC ACR HEC	E-PEE' TARE- ES TARES	T METER.	• • • •	:::		F	
	ld 400 gallons. The fed	cility als	T/A C	Brator	thet	can	bun	nb	to 20	gali	Zous t	er hour.	$\overline{\tau}$	$\overline{}$	7	$\overline{\tau}$	$\overline{}$	7	Λ_	$\overline{}$	$\overline{}$
C i	DUP			"	7	7	7	7	\perp	_	$\overline{7}$	$\angle \angle$		\overline{A}	7	77	77	\perp	\downarrow	7	7
A. PROCESS CODE (from lin above)	1. Am			2. UP OF M SUF (ent cod	EA- ler e)	OF	FOF FIC USE ONL	IAL	LINE	OU (F	PRC ESS ODE om liu ove)			. AMO		N CAPA	2	UNI F ME SURE (enter code)	^	FO FFIG US ON!	CIA E
X-1502	600	2	17_	G	7 I	*	Ì	ľ	5	10		119		-			12	20	20	İ	1
X-2T03	20)		E					6												
1 D 8 C	0.2	5		A				\perp	7							1	20	18	81		
$\frac{2}{D} = 3$	500,00	0		G				_	8											\coprod	\downarrow
3 D 8 3	1 milli	on		G	\sqcup		1	\downarrow	9			-							\perp		_
4	 		27			29	ᆜ	1,	10	<u> </u>	Ц.	• ,•					7,		25	Ц	\perp
EPA Form 3			· · · · · · · · · · · · · · · · · · ·				PA	GE	10							(CONT		_	REV	ERS

Continued from page 2. NOTE: Photocopy this page before completing in J have more than 26 wastes to list. Form Approved OMB No. 158-S80004 FOR OFFICIAL USE ONLY EPA I.D. NUMBER (enter from page 1) W DUP DUP The Mark Division and Control of the IV. DESCRIPTION OF HAZARDOUS WASTES (continued) C. UNIT OF MEA-SURE (enter code) D. PROCESSES A. EPA HAZARD. WASTE NO B. ESTIMATED ANNUAL QUANTITY OF WASTE 1. PROCESS CODES (enter) 2. PROCESS DESCRIPTION (if a code is not entered in D(1)) (enter code) Cooling tower blowdown P D 0 0 4 22 million D 8 3 Most of pure water evaporates D 0 110 2 D 0 0 4 P 59.800 D 80 D 0 1 0 Process wastewater 3 D 0 0 4 6.500.000 p Most of pure water evaporates 4 5 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 26 EPA Form 3510-3 (6-80) **CONTINUE ON REVERSE** V. FACILITY DRAWING (see page 4)

See initial application.

PUCKETT PLANT

REVISION OF EPA HAZARDOUS WASTE PERMIT APPLICATION

1201884

See Cover Letter in R4.0502 Ganual Date July 29, 1981 ile R4.0502D

	Please print or type in the unshaded areas only (fill—in areas are spaced for elite type, i.e., 12 characters/inch). Form Approved OMB No. 158-S80004																				
F	ORA	_	^		HAZ	ENVIR	ON	MENT								I. EPA I.D.			Res		2
	3	ŀ		EPA			onec	didati	rd Pen	mits P	rog	rem			•	FTXD	0 9 5 4	3 7	2	l 16 f	**
	CR/		FIC	AL USE ONLY		is informatio												711			
AP	PLI	CA.		DATE RECEIVE											MMENTS						_
							٠.													-	_
11.	FII	EST	10 1	R REVISED APPL	ICATIO	N SAME			إنوعال	All Ten	E S		7.2	تأجان		19 50 LE	13:55		بارونت _ي د ا	46	
revi	sed	app	dica	the appropriate bo- tion. If this is your to ber in Item I above.	c in A or irst appli	B below (ma ication and ye	rk or ou al	ne box ready	know	to ir	ndic fac	ate w	heti s EP	ner th A I.D	is is the first a . Number, or	pplication you if this is a revisi	are submittir d application	ng for y	our f	scility facilit	or s ty's
A.	FII			PLICATION (pies		-				-						Danew FA	CILITY (Co	npiete	item	below.	
		٠. 			Comple	te item belou	.)		•	_	•					\		OR NI	EW F	ACILIT	TIES
8	F	Ť	T	OP!	RATIO	ING FACILIT N BEGAN OF He to the left)	t TH	E DA	TE CO	DNST	RU	CTIO	YF., N C	mo., o OMM	B day) Enced	VA. MO		yr., mo ION B XPEC	., & d	iy) of 1 or 1	ER/ IS
	RE	VI!		APPLICATION				omple	te Ite	m I at	ove	,			·	7 74 74	77 76	APEC		-	
	Ę	Ţ.	FA	CILITY HAS INTER	IM STA	TUS		_								77	TY HAS A R		ERM	!T	
Ш	. PI	RO	CES	SES - CODES A	ND DES	IGN CAPA	CIT	IES	* 15 5			j., 1984	Legic St.	la ep	marin Richard Art				en fall f	- · · · ·	120
t	ent	erin	g co	CODE — Enter the c des. If more lines ar a process (including	e needed	, enter the co	delsi	in th	e spac	e pro	vide	id. II	a p	roces:	will be used	be used at the that is not inclu	scility. Tended in the li	lines a t of co	re pro des b	vided t	for then
a.	PR	oci	ESS I	DESIGN CAPACITY	– For s	ech code enti	ered.	in col	umn /	A ente	r th	10 CEE	 ecit	y of 1	he process.		•		٠.		
				NT — Enter the amou OF MEASURE — For		ount entered	in a	olumr	B(1)	, antei	r the	e cod	e fro	om th	list of unit a	neesure codes b	elow that de	cribes	the u	nit of	
		mei	Muri	used. Only the uni	s of mea PRO-	sure that are APPROPR					e ug	ed.				PRO	- APPROI	PIAT	E I INI	TC 05	
l _				ROCESS	CESS	MEASURE	FO	R PR	OCES			. : :	4.	PE	OCESS	CES	MEASU		R PR	OCESS	
-		90:	_							_	•	Tree		rt:							
ΙŦ	AN	ĸ	PILI	t (barrel, drum, etc.) t	501 502 503	GALLONS (CUBIC YAR	OR L	JTER		'		TAN Sur		e im	POUNDMEN'	701 T TO2	GALLON LITERS F GALLON	ER D	۱Y		
ı				- MPOUNDMENT	504	GALLONS	ERS	l .		•				RATO		TOI	LITERS P	ER DA	NY IR OI		
_	_	<u> </u>			1 279					": :							GALLON LITERS	S PER	HOU	ROR	•
			ILL	WELL	D#0	ACRE-FEET Would cover	r (th	e volu acre i	ime th to a	at .	٠;	OTH then	ER I	(Use)	'or physical, c logical treatm	hemical, TO4	GALLON LITERS I	S PER	DAY NY	O R	
١.		D 4		JCATION	D ST	depth of one HECTARE-	MET	ER .		· . ·		surfa	ce in	npou	occurring in to adments or in the processes	ciner-					
ē	CE	ĀN	DIS	POSAL	D11	GALLONS !	PER R D/	DAY NY	OR		•	the a	pace	prov	ided; Item II	(-C.)					
-	UR	FAI	SE #	MPOUNDMENT	DES UNIT	GALLONS (•			•		. .	 	NIT OF					UNIT	· OF
١.,	19417		E M	EASURE	MEAS	URE ~~	•	HT A		ASUR		٠.	. :, :;	ME	ASURE		MEASURE		1	MEAS	URE
			NS.	***********	• • • • •	<u> </u>	LI	TERS	PER	DAY.	_			• • •	<u>v</u>	ACRE-FE	:T		• • • •		
ן ב	UD	irs ic \	AR		• • • • • •	L Y	442	TRIC		SPER						ACRES	METER.			!	F
ė	AL	اصد	NS F	ERS			LI	TERS	PER	R HO	R			• • •			·				e
oth	AM Mr (PLI Sen i	E FC hold	R COMPLETING IT 400 gallons. The fa	Cility ala	<i>phown in line</i> o has an incin	nun Ierati	n <i>ber</i> s or the	X-7 a t can (pam r	2 A UP t	e <i>low)</i> o 20	galic	facili Ons Pe	ty has two sto r hour.	orage tanks, one	tenk can ho	ld 200	gailo	us emd	the
टं				DUP			1	1	T	7,	7				TT		777	77	7	1	abla
	\mathbf{T}	. PI		B. PROCES			ITY]		Ì		<u> </u>	RO-	B. PR	OCESS DESI	GN CAPAC	ITY	`.		
1, 4	9	CE	38	•				UNIT	OFF	POR]		CI	ESS				2.0	REA-	OFFI	DR ICIAL
JULI	ľ	PO-FIL	Het		iount reify)	The billion of the control of the co	1 %	URR		MLY		2 3	(from	DE m liet pre)	\$ 40 April 2	4. AMOUNT		SU (en	RE ter	ON	SE LY
32 	10	=						ode)	-			JZ	10	<u> </u>	10				100	20 -	32
X -	15	0	2	- 60	0	#1×++	\Box	G	11	44		5		1				11	$\perp \downarrow$		1
x -:	27	0	3		0 -	•	\coprod	E	\coprod	Ш		6						\coprod			
1	D	8	0	0.2	25			A	\coprod			7				•	12	91	ყ8	5	
2	D	8	3	500,00	00			G				8									
3	D	Т	3	1 millio	n			G	\prod			9		T				П			Π
Γ.	T	Г							Π	\Box				\top	1						

	; Ph	oto	cop	יט ץ	nis page before completing if you		: moi	71	than 26 w	vestes (_			Form Approved OMB No. 158-S80004		
•				_	BER (enter from page 2)		1	1					IAL USE G	TIAC		
	_				5 4 3 7 2 1 6 1	\	1	М	W		1	<u>DUP</u>		2 DUP		
	_				N OF HAZARDOUS WASTI	ES ('con	tin				$\mathcal{D}^{(1)}(\mathcal{F}_{2})$		Company of the frequency of the following of the following		
	Н	A 1	FP 4	٠ł	B. ESTIMATED ANNUAL	٥	UNI	IJ		 -				D. PROCESSES		
NO.	(e)	AZ/ AST	E I	10	QUANTITY OF WASTE	1 %	enter code)	_		3. PROCESS CODES 2. PROCESS DESCRIPTI (enter) (f) a code is not entered in						
=== 1	72	0	<u></u>	4	22 million		P	٦	D 8 3	1	- 1	27 - 80	87 ° 18	Cooling Tower Blowdown Most of pure water evaporates		
<u> </u>	D	0	1	0	- 59,800		Р	1	D 8 C	1	—			1000 of pare nacer evaporates		
3	DDC	_	1	0	6,500,000		P	1	D 8 3	+-	•	7-1-	•	Process Wastewater Most of pure water evaporates		
4	ľ	١	Ĭ						2. 1.	†				Plost of pure water evaporates		
5	1	П	П	П		-		1	į	1	1					
6	T						T		1]		1	• •			
7																
8									T			1				
9		Ц		Ц		F			\	<u> </u>						
10		Ц	Ц						ļ <u>.</u>	<u> </u>	-					
11	_	Ц	Ц	Ц	· · · · · · · · · · · · · · · · · · ·					<u> </u>	-					
12	1	Ц	Ц	Ц		F				 	-					
13	-	Н	Ц	Ц					1.1	+	-		1			
14	-	H	\vdash			-	$oxed{\downarrow}$	4	 	+-	-					
15	-	Н	$ \cdot $	Н			-	4	77-7	++	-					
16	-	H	$\mid \mid$	Н	·			4	7 7	-	7	1 1				
17	+	H	Н	Н		-	-			+	-		-	 		
18	-	H	H	Н	<u> </u>	L	H		7 1	+-	1	1 1	1-1	 		
19 20	-	H	Н	Н			H		1 1	+-	•					
20	-	H	H	H		-	H		1 1	+-	1					
72	+	H	H	H			H			++	-	-				
	+	H	H	H			H		1 1	†•	-		1 1			
24	+			H		1				+	_	1 1	1 1	1201886		
25	1			H		Í	H	1	7.7	†•	1	1				
26	<u></u>					1			77	1	T.	1 1	P			
EPA	Fon	n 3	510		6-60)	ت	الكويت. -	<u>ن</u> ـــ				Princes		CONTINUE ON REVER		

PUCKETT PLANT

REVISION OF TOWN HAZARDOUS WASTE PERMIT APPLICATION

			Table III	-i Generated He	izardous Wasti	15 and Managem	eat Activities		·	1888	•
Verbal Description	TDWR Sequence	T DWR Weste Code	EPA Hazard	EPA Hazardous	Off-Site		gement Activities plicable items) On-Site		Assemble Guardity Generated	O SIC Sode	
of Weste	Number	Number	Code	Wasto No.	Disposal	Storage ¹	Processing 3	Disposel	(Bs)	Process Natural Gas Su	Heene
. Sulfur Cake	NA	NA	<u> </u>	0004				_ <u>x</u>	42.000	ing - SIC Code	
CO ₂ Filter Solids	_NA	NA_		0004 D010				_X .	1.000	00	
ocess Wastewater	NA_	NA_		D010 D004 D010		·	•	<u>X</u> 2	8, <u>500,000</u> +	00	
Wastewater Sludge	NA NA	NA_	Ţ	0010 0004			· desir mateigrap ·	<u> X</u>	16,800		1
1,1,1			-	1		(************************************	(2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
		.: <u> </u>	·								* 1975. **-
				. •	· · · · · .		•				
	***************************************							the second second			
	•	-	 ^	;			•				
				•	· :	***************************************					T :
		•		•				* MOST	OF THIS WA	TER EVAPORATES	
						· .					777

[&]quot;Storage" means the interim containment or control of waste efter generation and prior to ultimate disposal.

[&]quot;Processing" means the extraction of materials, transfer, volume reduction, conversion to energy, or other separation and preparation of solid waste for rouse or disposal, including the treatment or neutralization of hazardous waste so as to render such waste nonhazardous, safer for transport, amenable for recovery, amenable for storage, or reduced volume. The "transfer" of solid waste for reuse or disposal as used above, does not include the actions of a carrier in conveying or transporting solid waste by truck, ship, pipeline, or other means.

TEXAS () EASTERN Transmission Corporation

WILLARD T. YOUNG MANAGER ENVIRONMENTAL CONTROL ENGINEERING SERVICES DIVISION

> June 10, 1981 OUR REF: 305-81

U. S. EPA Region 6 Sites Notification Dallas, TX 75270

Gentlemen:

Please find attached a Superfund Notification form which was omitted from our June 9 transmittal.

Very truly yours,

Willard T. Toling Manager, Environmental Protection

DLD/jc Attachment

bcc: Stirling Dougherty - w/attachment

Dr. D. H. France

Richard Kruse - w/attachment

W. G. Marks George Moe

Gerald Walker - w/attachment

1201889

Tot 11-81 CR3

rile R4. 0502D

Notification (Hazardous Waste Si()

17. Unknown 18. 2 Other (Specify) Natural Gas Sweetening

Ś

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must which applies.

	be mailed by June 9, 1981.	•		•
	Person Required to Notify: Enter the name and address of the person or organization required to notify.	Name TRANSWESTE Street P. O. Box City Houston	ERN PIPELINE COMPANY 2521 State TX Zip Code	77001
}	Site Location: Enter the common name (if known) and actual location of the site.	Marrie of SHANSWESTE Street See Item City Ft. Stockt		
	Person to Contact: Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.	Mame (Lest, First and Title Phone 713-759-53		ital Protec
,	Dates of Waste Handling: Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.	From (Year) 1959	To (Year) 1976	
_	Masta Torra Chana the antique was		-	
	Waste Type: Choose the option you p Option I: Select general waste types and you do not know the general waste types encouraged to describe the site in Item I—	source categories. If or sources, you are	Option 2: This option is available to persons fa Resource Conservation and Recovery Act (RCR/ regulations (40 CFR Part 261).	
_	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category. Source Place a boxes.	of Waste: n X in the appropriate	Specific Type of Waste: EPA has assigned a four-digit number to each listed in the regulations under Section 3001 of appropriate four-digit number in the boxes provide list of hazardous wastes and codes can be contacting the EPA Region serving the State in	RCRA, Enter to vided. A copy of obtained by
	3. Solvents 3. T 4. Pesticides 4. F F F F F F F F F	Construction Cextiles Certilizer Caper/Printing Casther Tanning Con/Steel Foundry Chemical, General Clating/Polishing Chilitary/Ammunition Clectrical Conductors Cransformers	located.	
	14. 🗆 S	Jtility Compenies Senitary/Refuse Photofinish .ab/Hospital		120183

Form Approved OMB No. 2000-0138 EPA Form 8900-1

required to notify. If you are not required to notify check "Other".

me 6-9-81

TEXAS (**EASTERN**

Transmission Corporation

WILLARD T. YOUNG **ENVIRONMENTAL CONTROL** ENGINEERING SERVICES DIVISION

> June 9, 1981 OUR REF: 304-81



U. S. EPA Region 6 Sites Notification Dallas, TX 75270

Gentlemen:

Please find attached three (3) Superfund notification forms for Texas Eastern Corporation's inactive disposal facilities.

Very truly yours,

lanager, Environmental Protection

DLD/jc Attachments

bcc: Stirling Dougherty - w/Transwestern att

Dr. D. H. France C. H. Lashley

W. G. Marks George Moe

Charles O. Petty

Huey Seyfarth - w/La Gloria attachmt Gerald Walker - w/Transwestern attachmt

Richard Kruse - w/attachment

Notification (Hazardous Waste Si(

United States Environmental Protection Agency Washington DC 20460

rnis initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

					•		### , <u>\$</u>			
Ā	Person Required to Notify:		AL. TP	ANSWEST	ERN PIPEL	THE COMP	ΔΝΥ			
	Enter the name and address of t or organization required to notify					THE COLL				
	or organization required to notify	/•	Street P.	0. Box	2521					
			city Ho	uston			State	TX	Zip Code	77001
3	Site Location:			TDANC	WESTERN P	UCVETT D	LANT			
	Enter the common name (if know	vn) and	Name of Site	TRANS	WESTERN P	UCKETT P	LANI			
	actual location of the site.		Street	See I	tem "H"					
	•		City Ft.	Stockto		Pecos	State	TX	Zip Code	
F	Person to Contact:	 		JUUCKUU	11 County	1 0003	31816		Zip code	
	Enter the name, title (if applicable	lo) and	Name (Last, Fi	rst and Title)	Young.	Willard	- Mar	. Env.	Prot.	
	business telephone number of the	ne, and ne person		770/750		<u> </u>				
	to contact regarding information submitted on this form.		Phone	<u>713/759</u>	-5355					
	submitted on this form.									
ם מ	Dates of Waste Handling:									
	Enter the years that you estimate			1959		1976	,			
	treatment, storage, or disposal be ended at the site.	egan and	From (Year)	1909	To (Year)	1970)			
	onded at the site.									
8_	·									
분	Waste Type: Choose the opti	on you pr	efer to comp	plete		•				
	Option 1: Select general waste t you do not know the general wa encouraged to describe the site i	ste types o	r sources, you	are	Resource		on and Ro	ecovery .		illar with the Section 3001
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.		of Waste: X in the appl	ropriate	EPA has a listed in tappropriate the list of	he regulatio te four-digit hazardous	our-digit ns under number wastes a	Section in the b nd code	n 3001 of R oxes provid s can be ob	ezardous wast ICRA. Enter th led. A copy of otained by which the site
	1. D Organics	1. 🗆 Mi	inina	- 1	located.		•	•		•
	2. 🗆 Inorganics		nstruction	-				 -		
	3. Solvents	2. □ 00 3. □ Te						•	ļ <u> </u>	
	4. Pesticides	4. □ Fe			 	 	}			
	5. Di Heavy metals		per/Printing	}	·					
_	6. Acids		ather Tanning	a	 					
_	7. D Bases		on/Steel Four	- 1					<u> </u>	
	8. D PCBs		nemical, Gene						ļ <u>-</u>	
	9. Mixed Municipal Waste		ating/Polishir		·					
	10. ☐ Unknown		ilitary/Ammu	- 1	-					
	11. Other (Specify)		ectrical Condi		 		 		ļ	
			ansformers		L		L		ــــا	
_		13. 🛭 Ut	ility Compani	es						A 1 0 0 2
_		14. 🛭 Sa	anitary/Refus	e l					12	01893
			notofinish		-					
			b/Hospital	. [
		17. 🗆 Ur	•							
			ther (Specify)	Ì			_			
		Natura	1 Gas Swee	etening						

Form Approved OMB No. 2000-0138 EPA Form 8900-1

	Notification of Hazardous Waste Site	Side Two	
F	Waste Quantity:	Facility Type	Total Facility Waste Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site.	Piles Land Treatment	cubic foot Indeterminant
	In the "total facility waste amount" space give the estimated combined quantity	3. 🖾 Landfill	gallons
	(volume) of hazardous wastes at the site	4. 🏻 Tanks 5. 🗖 Impoundment	Total Facility Area
	using cubic feet or gallons. In the "total facility area" space, give the	6. Underground Injection	square feet 1) 4,000 2) 5,500
	estimated area size which the facilities	7. Drums, Above Ground	acres
	occupy using square feet or acres.	8. Drums, Below Ground 9. Other (Specify)	
G	Known, Suspected or Likely Releases		
G	Place an X in the appropriate boxes to indica		Known □ Suspected □ Likely ☑ None
	or likely releases of wastes to the environme	ent:	
		g these items will assist EPA and State and ng the items is not required, you are encoura	local governments in locating and assessing aged to do so.
H	Sketch Map of Site Location: (Option		
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.	This site has active treatmen	side of the plant site.
		Texas, drive 18 miles East on I then West ½ mile to plant locations	Highway 290, then South 14 miles
			· · · · · · · · · · · · · · · · · · ·
1	Description of Site: (Optional) Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such	Area surrounding site is used with some livestock grazing	for oil and gas well production
	information as how waste was disposed and where the waste came from Provide		
	any other information or comments which may help describe the site conditions.	Inactive Landfills	†
		Process Area Office	Plant Entrance
			1201894
J	Signature and Title:		
	The person or authorized representative (such as plant managers, superintendents,	Name Willard T. Young, Mgr. E	nv. Protection & Owner, Present
	trustees or attorneys) of persons required	Street P. O. Box 2521	Owner, Past
	to notify must sign the form and provide a mailing address (if different than address	I. U. DUA EJEI	☐ Transporter
	in item A). For other persons providing notification, the signature is optional.	City Houston State TX	Zip Code 77001
	Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".	Signature Walth Journ	Date 6/9/87
			" /

.

TEXAS (**EASTERN Transmission Corporation**

WILLARD T. YOUNG MANAGER ENVIRONMENTAL CONTROL ENGINEERING SERVICES DIVISION

> August 18, 1981 OUR REF: 456-81

Mr. Dwight Corley EPA Region VI 1201 Elm Street Dallas, TX 75270

Dear Mr. Corley:

Please find attached a revised EPA Part A Hazardous Waste Permit Application for Transwestern Pipeline Company's Keystone Plant (EPA I.D. Number TXD000729038).

In accordance with Section 122.23 of EPA's Consolidated Permit Regulations, we are submitting the revised application due to laboratory waste analysis results. Chromium was suspected to be present in the wastewater surface impoundment in an amount greater than the EP toxicity level and therefore was identified on the initial application. After the initial application was submitted, laboratory analysis performed by Aqualab of Austin, Texas indicated acceptable chromium levels at this facility.

If there are any questions concerning this submittal, please contact Anita Cuevas at 713/759-5318.

This HAS AIRENY been Submiffed

Will Hold Gore File Should we Re CLASS IRON SUITING FILERS

ANC/jc Attachment

S. M. Dougherty - w/attachments

Dr. D. H. France W. G. Marks

George Moe

Gerald Walker - w/attachments

Very truly yours,

Willard T. Ydung Manager, Environmental Protection

				type in the unshaded			foot l	•	.	•		•	-	•			Form	Anneow	ed OMB I	No 1	58.9	SRO	nna	٠	
F	ORM	_	es 81	re spaced for elite typ		U.T IVI	RONM									1011	·		NUMBE		2				
	3	Į,	Œ	FPA	HA		S W A Consol							IC.	41	ION 🕻 .	FT	x D	000	77	2 9		13	8	1
R	CRA	_	~		(T	his information								- •	,-		2					V2.13	- 	يلبخ	-
AP	PLIC	CA.	T101	DATE RECEIVED	15.05	Contract Contract	A STATE OF		- 1	200					_	MENTS		3							
广	PPR		ED	(yr., mo., & day)								-								-					
L	<u>_</u>	<u></u>	-	14 · · · · · · · · · · · · · · · · · · ·	<u> </u>	011	a a difficu				ال المال	ودوري	S.C.	- Fre	Sec. 1			والإستارة	in the second	200.5		A. D.	وميسو	-	-
				R REVISED APPL							_		_		_	s is the first at						_	r fac	ility	or a
rev EP	ised A I.I	app D. N	olica Jum	tion. If this is your for in Item I above. PLICATION (place)	irst appl	ication and y	ou aire	ady	kno	w yo	ur fa	cility													
 ^.	Ę]1.		STING FACILITY (See inst		ie finiti			-			y.				2.NI	EW FA	CILITY (•				
		• VR			EXIST	ING FACILI	TIES,										VR.	Mo.	DAY	_ PR	OVI	DE	THE	DAT	
8		$\prod_{i,j}$	<u>,</u>			n Began o es to the left		DA.	TEC	:ONS	TRU	JCTI	DN (CON	IMI	ENCED				710	ON I	BÉG	AN	DR I	5
	RE	_	SED	APPLICATION (nd co	nple	te It	em I	a b o v	e)					□ 2. F	ACILIS	TY HAS	A RC	RA	PEF	MIT	_	
 	PR	<u> </u>		SES - CODES AN			CITU			· in	- Ja	ع برجيد	Eur:	25	- 6	VALUE OF A	7,					7			
!				CODE — Enter the co					s be	ow t	hat b											re c	rovi	ded f	or
1	ente	erin	g co	des. If more lines are process (including i	needed	l, enter the co	ode <i>(s)</i> i	n th	e spa	ce pi	ovid	ed. J	fag	oroc	ess	will be used ti									
				DESIGN CAPACITY		ech code ent	ered in	cole	umn	A en	ter t	he ca	paci	ty o	ft	ne process.									
	2. 1	UN	IT C	T - Enter the amou	each arr								de fr	mor	the	list of unit m	easure c	odes be	low that	desc	riber	the	unit	of	
	•	mea	MUR	used. Only the unit	PRO-	APPROPE					De u	sed.						PRO-	APPF	ROPE	HAT	ΈL	INIT:	S OF	
\mathbf{I}_{-}			. P	BOCESS	CESS	MEASUR DESIG	E FOR	PRO	DCE						PR	OCESS		CESS	MEA		E FC	RI	ROC	ESS	
_	tore		_										وسل و	ent:	_		-								_
T	ANI	ĸ	PILI	₹ (barrel, drum, etc.) t	501 502 503	GALLONS GALLONS CUBIC YA	OR LI	TER				TAI		ĆE I	1841	OUNDMENT		TO1 TO2	GALL! LITER GALL!	S PE	R D	AY	-		*
•				MPOUNDMENT	504	CUBIC ME	FERS		8			INC						TOS	LITER	PER	RD	AY	OR		
-	ispo		_	WELL	D79	6411 ANS			_					`					METR GALL LITER	ONS	PER	HC	UR		
	ANI			WELL.	D80	ACRE-FEE would cover	T (the	volu	me t	hat		ther	mai	or t	riol	or physical, ch ogical treatme	nt	T04	GALL	ONS	PER	D/		R	
١.	AN!	D A	PPL	SCATION	D81	depth of on MECTARE- ACRES OR	METE	R.				surf	ace	imp	04 F	ccurring in tal idments or inc the processes	iner-								
ď	CE	AN	DIS	POSAL	D82	GALLONS LITERS PE	PER D	AY	OR							ded; Item III-									
'	UKI		-E 1	MPOUNDMENT	DE3 UNIT	GALLONS LOF	OK LI	TER	5						Ut	NIT OF							U	NIT	OF
۱.	INIT	r 01	F MI	EASURE	MEAS	URE	UNI	T OF	MF	ASU	RF	•		١	ME	ASURE CODE	UNI	T OF N	MEASUR	F			M	ASL	JRE
] [AL	LO	NS.	• • • • • • • • • • • • •		6	LITI	RS	PER	DA	r	• • •	• •		_	v	ACI	RE-FEE	т						_
C	UBI	IC 1	/AR	DS		Ā	MET	RIC	TO	NS P	ERH	OUF	₹			W	ACI	RES	METER.					F	!
G	AL	LO	NS F	ER DAY		U	LITI	RS	PER	HOL	JR.					H	•					• •			
otr	er c	an i	hold	R COMPLETING IT	cility als	o has an inci	erator	that	X-7 L CBN	burr	x-2 t	10 20	/): #) gali	ions	pe Pe	ry has two stor rhour.	rage tan	ks, one	tenk can	noia	200	gai	ions	and t	.he
Ċ				DUP	-	7/4 =	/7	7	abla	abla	abla	abla	7	abla	7	111	7	77	1	7	7	\	abla	abla	abla
	Л		₹0-	B. PROCESS			ITY	7	\vdash	<u> </u>	_	L ,	1-			B. PRO	CESS	DESIG	N CAP	ACI	TY	7	十		
Į,	1	E	35				2. U		OF	FOF		BER	C	PR	5						2. L			FO FF10	R
Z	117	om	DE list ve)		CUNT		SU (FR	RE		USE		ME	Circ	OD om l	is t		I. AM	TNUC				ME. IRE nter	` [US	E
F	19	=	70	je -			21		1.	_	- 11	JZ		-		10				27		ode)	1.		32
<u>X-</u>	15	0	2	60	0							5													
X -	$\frac{1}{2}T$	0	3	2	0	····						6													
1) 8	0	0	, 22		,	۱				7								•	إرا	۱ ۱	*	δ	
2					· · · · · · · · · · · · · · · · · · ·		$\dagger \dagger$	T		\top	1	8	†	П						1	14	ال			1
3		T					11	\dagger	H	\top	+	9		H								\dagger	\dagger		\dagger
┢	+	╂	 _				4-4-	4-	11				1	ш							\sqcup			<u> </u>	

EPA Form 3510-3 (6-80)

11111	UBC	Troi	mτ	ו שח	ront.	ŧ.			٠					
H. Pi					continued)	٠			73		C-3		S. C.	には、これが、またい。これが、またい。
. SPA					ITIONAL PROCESS CODES OF N CAPACITY.	R FO	RDE	SCRIB	ING	OT	HER	PROCESS	ES (code "	"TU4"). FOR EACH PROCESS ENTERED HERE
7.0			96.	,,,	N CAN MAINT		•							
														· · · · · · · · · · · · · · · · · · ·
														•
							,							
					• •				•					
														•
			٠								•			energy of the state of the stat
														•
								,						· · · · · · · · · · · · · · · · · · ·
				-	•									
						,						-		
	•													
					÷									
D	ESC	RII	PT	O	OF HAZARDOUS WASTE	5	1	-	74		Carrier S	in the		
							our-	digit ni	TUD PARTIE	er fi	rom 4	O CFR. S	ubpart D f	for each listed hazardous waste you will handle. It you
han	die	haza	ardi	ous	wastes which are not listed in 4	10 C	FR, S	ubpart						from 40 CFR, Subpart C that describes the characteris-
tics	and	i/or t	the	to	cic contaminants of those hazard	ous '	waste	š.						
EST	MIT	ATE	D	AN	NUAL QUANTITY - For each	liste	d was	sto ente	red	in c	mulos	n A estim	ate the qui	antity of that waste that will be handled on an annual
						t ent	ered i	n colur	nn /	A est	imate	the total	annual qua	antity of all the non-listed waste(s) that will be handled
Whi	cu l	20156	:33	tna	t characteristic or contaminant,									
UN	IT (DF N	ME	ASI	JRE - For each quantity enter	ed in	colu:	mn B e	nte	r the	unit	of measur	re code. Ur	Inits of measure which must be used and the appropriate
600	es a	re:			• •						,			
			E	NO	LISH UNIT OF MEASURE			CC	DE	Ĺ		MET	RIC UNIT	OF MEASURE CODE
			ī	0	NDS	:			P	-			GRAMS.	K
			٦	101	15 	• • •	• • •		T		•	METI	RIC TONS	i
									uni	its o	f mes	sure must	be convert	ted into one of the required units of measure taking into
SCC	חטכ	t the	ap	pro	priate density or specific gravity	of t	he wa	ste.						
PR	CI	SSE	S		•									
					DES:						.i			de fel form the time of a common decision of the district
					ardous waste: For each insted h w the waste will be stored, treate								ect the coc	de(s) from the list of process codes contained in Item [I]
													ed in colu	amn A, select the code(s) from the list of process codes
						esse	that	will be) US	ed t	o stor	e, treat, a	nd/or dispo	ose of all the non-listed hazardous wastes that possess
	ma No:	icha m:	Fo	ter:	stic or toxic contaminant,	1 011	Cett	codes.	lf m	nom	200 0	eeded: [1]	Enter the	s first three as described above; (2) Enter "000" in the
	ext	reme	riç	jht:	box of Item IV-D(1); and (3) En	ter i	n the	tbace b	rovi	ded	on pa	ge 4, the l	ne number	er and the additional code(s).
-	-	200	-		00019710N: it = and it = an it							and minametr		in the spaceid-d on the for
Z.	PH	JUE	22	UE	SCRIPTION: IT a code is not list	tea t	or a p	rocess 1	mer	Will	De us	ea, aescrit	se the proc	cess in the space provided on the form.
OTE	: H	AZ/	ARI	DO	US WASTES DESCRIBED BY	HOR	E TH	AN OR	IE (EPA	HAZ	ARDOUS	WASTE N	NUMBER - Hazardous wastes that can be described by
					lazardous Waste Number shall be								- 41	-less and some B. B. and B. burneland and a second
					the EPA Hazardous Wasse Numb e waste and describing all the pro									plete columns B,C, and D by estimating the total annual the wester
	in i	colur	mn	A	of the next line enter the other	EPA	Hazi	erdous						to describe the waste. In column D(2) on that line enter
3					above" and make no other entr					- h-			- 	
₽.	다라	#8T 1	518	2	for each other EPA Hazardous V	aste	MRW	DAL ZUR	: C8	in De	u160	TO GENCTIO	THE NAZAP	rucus waste.
KAM	PLI	FO	R	CO	MPLETING ITEM IV (shown In	line	num	bers X-	1, X	(-2,)	K-3, a	nd X-4 bel	ow) - A fa	acility will treat and dispose of an estimated 900 pounds
														treat and dispose of three non-listed wastes. Two wastes is corrosive and ignitable and there will be an estimated
					of that waste. Treatment will be									a is contense due iAurenia and fuals will be su satimatico
	_	. EP	·	Т		c . (UNIT			-				D. PROCESSES
ا . ا		7 4		2	B. ESTIMATED ANNUAL	OF	MEA.							` <u>`</u>
Ö	r A (en)	STE er co	. N	7	QUANTITY OF WASTE	(e	nter ode;	1	1	1. PI	roce (en	SS CODE: iterj		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
	1	_	Т	+		۳	~~	 	Г	1		111	1 1	
(-1	K	0 5	5	4	900		P	TO	3	D	8 0			
{	+	+	+	+		┯	+	+	,	 		 	 	1201897
-2	Dl	0/1	0	2	400		P.	T'O	3	ם'	8 0		' '	
	4	┯.	4	4		⇊	1	 		Γ.				<u> </u>
			. 1	•	100	1	P	17'0	٠ -	1_'	_'_	1 ' '	1 ' '	1
(-3 l	D	010) [.	1	100	1 1	\boldsymbol{r}	11 0	.5	ומו	8 N	I	i	
K-3	D	0 0	7	1	100	Ц		10	<u> </u>	P	8 0			

Continued from the front.							
IV. DESCRIPTION OF HAZARDOUS WAS	(continued		The second second				-
E. USE THIS SPACE TO LIST ADDITIONAL	PROCESS C	ODES FROM	TITEM D(1) ON PAC	3.			
•	•						
1							
•		-					
i			•				
		•			•		
					•		
ı			1				
_							
ł				,			
EPA I.D. NO. (enter from page 1)		_	·				
FTXD000729038							
V FACULTY DRAWING	والمشارعين والمسترية والمتراجع	والمراجع والمراجع والمساور والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج			and the state of		
V. FACILITY DRAWING All existing facilities must include in the space provide			of the facility (see instruc				
VI. PHOTOGRAPHS							STATE OF THE STATE
All existing facilities must include photograph.	s (aerial or or	ound-level)	that clearly delineate a	II existina stru	ctures: ex	isting stor	ace.
treatment and disposal areas; and sites of future	re storage, tre	eatment or dis	sposal areas (see instru	ctions for more			-3-,
VII. FACILITY GEOGRAPHIC LOCATION	- THE CAN	THE WAY	or the state of the state	Francis Company	Contract of	4	
LATITUDE (degrees, minutes, & se	econds)		LONGIT	TUDE (degrees, n	ninutes, & e	econds;	
3 1 5 7 0 0	1	- I	_	1 0 3 0 :	3 0 1	6	
VIII. FACILITY OWNER	77	Carlo Carlo Carlo		77 74 71 7	77 TO 1	7	
A. If the facility owner is also the facility opera skip to Section IX below.	tor as listed in	Section VIII or	Form 1, "General Infor	mation", place ar	n "X" in th	e box to th	e left and
B. If the facility owner is not the facility operat	tor as listed in !	Section VIII on	Form 1, complete the fi	ollowing items:			
	FACILITY'S	EGAL OWNE	R		2. PHON	NE NO. (an	ea code & no.)
Ē					$\Box \Box \Box$]	
13 14					100 - 100	99 - 61	
3. STREET OR P.O. BOX			4. CITY OR TOWN	5.	ST.	6. ZIP (CODE
F		Ġ _				111	
IX. OWNER CERTIFICATION		15-1-18-		CM 14 1 1 2 2 2			
I certify under penalty of law that I have person						يدبهجست	
documents, and that based on my inquiry of the							
submitted information is true, accurate, and co	orpotete. I am						
including the possibility of fine and imprisonn	lent.	·	_				
A. NAME (print or type)	8. 510	HATURE (701		. DATE SI	GNED	
Willard T. Young	\mathcal{L}	Delta	Houng		8/1	9/21	
Manager, Environmental Protection						1,0	
X, OPERATOR CERTIFICATION						不管	
I certify under penalty of law that I have person	nally examin	ned and am fa	miliar with the inform	ation submitte	d in this a	and all att	ached
documents, and that based on my inquiry of the submitted information is true, accurate, and co	nose individu omblete. I ar	ais immediate a aware that t	ely responsible for obt here are significant per	vining the info halties for wibr	rmation, l nittino fel	Delleve ti	ation is
including the possibility of fine and imprisonm	nent.		o a. a arg.iii iaarii pui			T.EA.A.	ದ ಕೂಡು
A. NAME (print or type)	B. SIC	NATURE		Te	DATE SI	GNED	
		_		[]			
<u> </u>							
			and the second s				

### Part Par	NOTE.	Ph	oto	op:	y ph	is page before completing if y	18	re m	ore	than	26 w	es tes	to lis	Ł ·		Form Approved OMB No. 158-S80004					
		EPA	1.0	. N	UM	TI TAE	1						FC	OR OFFICI	AL USE	17/4 C 1					
HARAPA PART						0 7 2 9 0 3 8 1		7		\						2 DUP					
1 0 0 0 1 40,000	10.1	_			_	N OF HAZARDOUS WAS					1)	7.4	1.CC	The first							
1 0 0 0 1 40,000 P 0 8 0 portion represents 25% of weight 3 4 5 6 7 7 8 8 8 8 8 9 9 10 10 10 10 10 10 10 10 10 10 10 10 10	NO.	WA (e)	A. E AZ/ ST nter	AR EN	D. (0)	QUANTITY OF WASTE	١	coa	e)	<u> </u>			(en	ter)	3	2. PROCESS DESCRIPTION (if a code is not entered in D(1))					
2		1	0	0						D	8 0		1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 1	Iron Sulfide Filters: Active portion represents 25% of weight					
4	2									<u> </u>	·•										
5 6 7 7 8 8 9 9 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3									'											
6	4										,		1	, ,		,					
7 8 9 10 11 11 11 11 11 11	5										7		,			·					
8	6												1								
9	7												1		1 -1 -						
10	8												•								
11	9					· .					<u>'</u>				. ,						
12	10							1	L	Ļ	•	L.	•								
13	11						_	\downarrow	L	<u> </u>	· 		<u>.</u>								
14	12							ŀ		Ŀ											
15	13						_	_	_			1									
16	 							_		-			-		, ,						
16	15						_	1		<u> </u>	·	ļ.,		-	1-1-						
18	16	_					_	\perp	_			-		-							
19	17	_	Ц				\perp	1			- , -		1								
19	18	_	Ц					_	ŀ	ļ.,		1			1 7						
20	19		Ц				_	$oldsymbol{\perp}$					-								
21	20		Ц		Ц	·	_	1	\perp				· -								
22	21		Ц		Ц			_	_												
23 1201899 24 1201899 25 1201899	22						_	_	-												
25	 	_						_	_	ļ.,	_	<u> </u>									
25 1 1 1 1 1 1 1 1 1		1	Ц			 	_	1	_	<u> </u>	1		<u> </u>			1201000					
13 - 14 17 - 17 17 - 10 17 - 10 17 - 10 17 - 10	-	-					_	1	-	ļ.,	1			 							
				510	3	27 6.90)	<u>,,</u>	,,	<u>_</u>	17	- 11	87	- 20	17 - 20	17 - 10	CONTINUE ON REVERSE					

Continued from page 4.

V. FACILITY DRAWING (see page 4)

SEE FIRST APPLICATION



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION VI

1201 ELM STREET DALLAS, TEXAS 75270

July 13, 1981

Transwestern Pipeline-Keystone Plant

Attn: Willard Young

P.O. Box 2521

Houston. Texas 77001

EPA ID NUMBER: TXD 00 072 9038

FACILITY LOCATION:

Section 21, Block C-77

Kermit, Texas

This is to acknowledge that the Environmental Protection Agency has completed processing the information submitted in your Part A Hazardous Waste Permit Application. It is the Agency's opinion, based on the assumption that the information submitted is complete and accurate, you as an owner or operator of a hazardous waste management facility have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. EPA has not verified the information submitted. If it is determined that the information is incomplete or inaccurate, you may be asked to provide additional information or in certain circumstances it may be determined that you do not qualify for interim status. In addition, this notice does not preclude a citizen from taking legal action under the provisions of Section 7002 of RCRA.

A facility not meeting the requirements for interim status under Section 3005 of RCRA may be required to close until such time as a hazardous waste permit is issued. Interim status may also be terminated, according to procedures in 40 CFR Part 124, if the owner or operator fails to furnish additional information which EPA requests in order to process a permit application.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265 or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The enclosure to this letter identifies the processes your facility may use, their design capacities and the types of waste your facility may accept during interim status. This information was obtained from the Part A Permit Application. If you wish to handle new wastes, change processes, increase the design capacity of existing processes, or change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

If you have any questions concerning this letter, please contact Dwight Corley at (214) 767-2765, or write Mail Code 6E-P. 1201 Elm Street, Dallas, Texas 75270.

Sincerely

Diana Dutton, Director

Enforcement Division (6E)

1201901

cc: Texas Department of Water Resources

CONDITIONS OF OPERATION DURING INTERIM STATUS

Date prepared: July 13, 1981

environmentally a mazardous wastes	his facility submitted in Part A of the Hazardous Waste Permit is not a determination by EPA that this facility is an cceptable facility for treating, storing or disposing of the listed below.	
. Facility name	, location and EPA identification number:	
Name:	Transwestern Pipeline-Keystone Plant	
Location:	Section 21, Block C-77	
	Kermit, Tx TXD 00 072 9038	
II. EPA consider and therefore the in 40 CFR Parts 1	s the following to be the owner or operator of the facility person(s) who must comply with the requirements set forth 22 and 265:	
Owner's nam	e: Transwestern Pipeline Company	
Operator's	name: Transwestern Pipeline Company	
following process	period of interim status, the facility may use <u>only</u> the es for treating, storing or disposing of hazardous waste, capacities that are indicated:	. •
Process Coo	e Design Capacity Amount Unit of Measure O.220 Acre-Feet	
D80	0.220 Acre-Feet	
D80	0.220 Acre-Feet	
D80 S04 Solid wastes exhibitations wastes	0.220 Acre-Feet 1,450,000. Gallons eriod of interim status, the facility may handle only the with the following EPA Hazardous Waste Numbers, and/or biting hazardous characteristics with the following EPA	
D80 S04 SV. During the phazardous wastes solid wastes exhi	0.220 Acre-Feet 1,450,000. Gallons eriod of interim status, the facility may handle only the with the following EPA Hazardous Waste Numbers, and/or biting hazardous characteristics with the following EPA	
D80 S04 Solid wastes exhibitations wastes	0.220 Acre-Feet 1,450,000. Gallons eriod of interim status, the facility may handle only the with the following EPA Hazardous Waste Numbers, and/or biting hazardous characteristics with the following EPA	2

(214) 767-2765

_	Pho	toco	py th	is page before completing if you	.an	mo	/e 1	than 26 w				Form Approved OMB No. 158-S80004
TO THE				BER (enter from page 1)			Y	•i¥		OR OFFIC	IAL USE	T/4C
W.T				0 7 2 9 0 3 8 1 0 OF HAZARDOUS WAST	E.	<u> </u>	L			DUP		2 DUP
10.1	A	EF	A	B. ESTIMATED ANNUAL	Te	.UN	-	uea)		, pendarang 14 A		D. PROCESSES
LINE NO.	WAS (ent	TE TE	NO ode)	QUANTITY OF WASTE		en te code				ESS CODE		2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	-	0 (~~	40,000	٦	P		D 8 0	127-1	9 87 - 89	87 - 29	Iron Sulfide Filters: Active portion represents 25% of weight
2	П	1							1		1	
3		1						-				
4		1			1		·	-	7 7	1	 	
5		†			1			7.7	7 7	 , , , 	1	. ,
6		1			1			,,,	7 7	111		
7		1			1			-	1	1		
8	П	1			T			1 7	1 7 7		1	
9		T			T				' '			
10					T				1			
11		1			T							
12					T			1		, ,		
13		T	T									
14												
15	П	T			T				1 1			
16								1 1.				
17												
18												
19		T			T							
20		T						1				
21					T			11	1			
22		T										
23												
24												1201903
25		T		_	T							
26			I			P		87 - 80	117	80 A7 · 80	127 - 109	
EPA I			0-3 (6-80)			-	PAGI				CONTINUE ON REVERSE

behind the "3" to identify photocopied po

				type in the unshaded e spaced for elite typ			nch	<i>)</i>								Form Appro	ved OMB No	. 158-	S8000	24		
1	RM	,	\$	EPA		INVIR	W Cons	AS7	TE F	EF	imi'	T AP	PLI	CAT	LION	I. EPA I.D FTXD	0 0 0 7		9 0	3 8	3	
	RA R (IC	AL USE ONLY			_		_		_				Maring of the		A STATE OF THE PARTY.			242	2	Z
API	LIC	CAT		(yr. mo. & day)				•. •						CO	MMENTS							_
		3							- .		١.			: ·								_
	_			REVISED APPL							٠.	B			Opposition of		No.				STATE OF	
revi EPA	ed 1.E	app), N	lica: uml	the appropriate boo ion. If this is your f er in Item I above.	irst applic	ation and yo	a uc	ireach	y kno	W Y	our f	eility										
A.		_		PLICATION (plass string facility (See instru		efin			_			·.		Ç] 2.NEW F/		FOR 1	NEW !	ACI	LITIE	
J 00 2		Ţ,		OPE	RATION	NG FACILIT BEGAN OF to the left)	TH	i, PR(IE D/	OVIE ATE	CON	HE E	UCTI	(yr., ON C	mo., d OMM	& day) ENCED	¥8.	DAY	PROV (yr., m TION EXPE	0., & (iay) ((N O	OPEF R IS	RA
8.	RE	VIS	ED	APPLICATION (-		nd c	ompl	ete I	em.	I abo	ve)			ַ] 2. FACIL	ITY HAB A	RCRA	PERI	AIT		_
Ш.	PR	100	ES	SES – CODES AN	ND DESI	GN CAPA	CIT	IES	> 7**	2.0	- N			- (<u>1</u>)	de la company			A. N	963		1975	A
B. 1	ente Jose PRC	ering eribe OCE	s the	CODE — Enter the coles. If more lines are process (including including inclu	e needed, its <i>design d</i> ' For ea	enter the co capacity) in	de/s the	in t	prov	ace (provi on t	ded. I he for	f a p m (/1	rocess Ism III	will be used the /-C/.							
	2. (UNI	TO	F MEASURE — For used. Only the unit	each amo								ie fro	om the	e list of unit me	esure codes l	below that d	escribe	s the	unit d	of	
			Jure	. Only the unit	PRO-	APPROPR	IAT	E UN	ITS)F	J 196 (apou.		٠.		PRO						
_			Pi	OCESS	CESS	MEASURE DESIG				SS 	. .	_			OCESS	CES COD		JRE F				_
ST W	ANI	TAI K TE I FAC	PILI E ()	APOUNDMENT	\$02 \$03 \$04	BALLONS (BALLONS (EUBIC YAR EUBIC MET BALLONS (DR I	LITE OR B LITE	RS RS			TAI	PAC		POUNDMENT R	T0 T0:	LITERS B GALLOI LITERS	PER I VS PE PER I ER HO TON: VS PE	PAY PAY PUR C S PER R HO	Y OR	u VR;	
- -	ANI 	DF! DA	LL PPL	WELL.	D80	BALLONS (ACRE-FEET would cover lepth of one HECTARE- ACRES OR	one one for well well	e voi ecre of) OI ER CTAR	ume to a R RES	that		ther proc surf ator	mal (:essei sce (i s. D:	or biol not c npour secribe	for physical, cha logical treatmen occurring in tank ndments or incir e the processes i	t ta, ner- n	_	45 PE	R DA'		!	
. ~				POSAL		Ballons i Liters pei Ballons (R D	AY				the .	space	Provi	ided; Item III-C	i.)					-	
					UNIT	OF					1		•		NIT OF	•	٠.			• • •	IIT O	
<u>u</u>	NIT	OF	ME	ASURE	MEASL COD		U	NIT C	F M	EAS	URE		•		EASURE CODE	UNIT OF	MEASURE				ASUF ODE	
T 0 0 0	TE VBI VBI	RS IC Y IC M LOP	AR IET IS P	DS		1	MI	MS F ETRI LLC TERI	ER I C TO NS I S PEI	NS PER	R. PER HOU DUR	HOUI R			D w g	MECTAR ACRES, MECTAR	ET. E-METER.	:::	• • • •	• • •		
oth	BT C	an i	old	R COMPLETING IT 400 gallons. The fa	cility also	n <i>own in line</i> has an incin	<i>nui</i> erat	n <i>oen</i> or th	1 X-7 81 C8	and bu	LU nb	to 20	y: A galic	ns pe	ity nas two stora ir hour.	ige tanks, on	e tank can h	old 20	C gallo	ons ar	nd th	8
ċ				DUP	f	/A = 1	$\overline{\ }$	abla	1	7	abla	\int			TTT	77	$\overline{111}$	abla	7	7	7,	<u> </u>
	Г			B. PROCES		N CAPACI	_ <u>_</u> _		\top		<u>. </u>	Te	۲.		B. PRO	CESS DES	IGN CAPA	CITY		\vdash		7
LINE	.5	PRES	E Het		IOUNT Icify)		0:	UNIT ME/ URE inter ode)	۱۲.	FIG US ON	CIAL E	LINE	C	PRO- ESS DDE m liet ove)		. AMOUNT		0	UNIT MEA URE Inter ode)	OF	FOR FICI USE ONL	A
X-1	S	o	2	60	0		1 '	G	-	Ī	7	5	i i	- 10	19			2	34	Ï	Ŧ	T
X-2	T	0	3	2	0			E				6									\top	1
1		8	0	0.	22			Α				7					12	013	104			1
2												8										
3												9	\prod									
4		1	ıΠ				F	T	1			10	LΤ					T	IT	П		T
7			L.				1		L	L			1. 1		L			1		1 1	1	,

DW0550

TEXAS WATER COMMISSION NOTICE OF REGISTRATION INDUSTRIAL SOLID WASTE GENERATION/DISPOSAL

01-29-86

THIS IS NOT A PERMIT AND DOES NOT CONSTITUTE AUTHORIZATION OF ANY WASTE MANAGEMENT ACTIVITIES OR FACILITIES LISTED BELOW. REQUIREMENTS FOR SOLID WASTE MANAGEMENT ARE PROVIDED BY TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TEXAS WATER COMMISSION (TWC). CHANGES OR ADDITIONS TO WASTE MANAGEMENT METHODS REFERRED TO IN THIS NOTICE REQUIRE WRITTEN NOTIFICATION TO THE TWC.

DATE OF NOTICE: D1-30-86

REGISTRATION DATE: 12-15-81

REGISTRATION NUMBER: 32258

EPA I.D. NUMBER: TXD000729038

THE REGISTRATION NUMBER PROVIDES ACCESS TO STORED INFOR-MATION PERTAINING TO YOUR OPERATION. PLEASE REFER TO THAT NUMBER IN ANY CORRESPONDENCE.

COMPANY NAME: TRANSMESTERN PIPELINE CO

MAILING ADDRESS: P.O.BOX 1188

HOUSTON, TEXAS

77001

GENERATING SITE LOCATION:

KEYSTONE PLANT NE NEAR KERMIT, TEXAS

CONTACT PERSON: DAVID BAYS

PHONE: (713) 654-6109

NUMBER OF EMPLOYEES: 8 - 24

TWC DISTRICT: 10

REGISTRATION STATUS: INACTIVE REGISTRATION TYPE: GENERATOR

HAZARDOUS WASTE STATUS: NON-HANDLER



I. WASTE GENERATED:

NUMBI	—	CLASS	CODE	DISPOSI	ION
001	MISC. PLANT WASTES	II	270770	ON-SITE	
002	WA SHWA TER	II	208110	ON-SITE	
003	COOLING WATER BLOWDOWN	I	100530	ON-SITE	WORTH CO.
004	AMINE FILTERS	I	173470		120

II. SHIPPING/REPORTING: NOT APPLICABLE

GAS ACCOUNTING

REGISTRATION NUMBER: 32258

COMPANY NAME: TRANSWESTERN PIPELINE CO

III. ON-SITE WASTE MANAGEMENT FACILITIES:

FAC N	O. FACILITY	STATUS
01	LANDFILL	ACTIVE
	DISPOSAL	***************************************
	OF WASTE NUMBER(S) DOI	
	LANDFILL-350 CU YD CAPACITY	
02	SURFACE IMPOUNDMENT	ACTIVE
	STORAGE	
	OF WASTE NUMBER(S) 002	
	WEST CONCRETE LINED 77x220x4°D	
03	SURFACE IMPOUNDMENT	ACTIVE
	STORAGE	
	OF WASTE NUMBER(S) 003	
	EAST CONCRETE LINED 143X220X4°	
04	INCINERATOR	ACTIVE
	PROCESSING/DISPOSAL	
	OF WASTE NUMBER(S) 004	

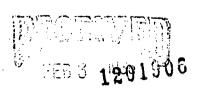
UNLESS OTHERWISE STATED ABOVE, FACILITIES ARE LOCATED AT KEYSTONE PLANT NE NEAR KERMIT, TEXAS COUNTY OF WINKLER

IV. RECORDS.

A. FOR PURPOSES OF FILING ANNUAL REPORTS PURSUANT TO TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TWO PERTAINING TO INDUSTRIAL SOLID WASTE MANAGEMENT, RECORDS SHOULD BE MAINTAINED FOR STORAGE, PROCESSING AND/OR DISPOSAL OF THE FOLLOWING WASTE(S) LISTED IN PART I:

003 100530 COOLING WATER BLOWDOWN

004 173470 AMINE FILTERS



NOTICE OF REGISTRATION CONTINUED)
REGISTRATION NUMBER: 32258
COMPANY NAME: TRANSWESTERN PIPELINE CO

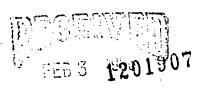
B. PROOF OF RECORDATION IN THE COUNTY DEED RECORDS, AS REQUIRED BY TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWR, SHOULD BE SUBMITTED TO THE EXECUTIVE DIRECTOR FOR THE FOLLOWING FACILITIES LISTED IN PART III IN ACCORDANCE WITH THE FOLLOWING SCHEDULES:

NEW FACILITIES - PRIOR TO INITIATION OF DISPOSAL OPERATIONS.

EXISTING FACILITIES - AS SOON AS POSSIBLE, BUT NO LATER THAN SIXTY (60) DAYS FROM THE DATE OF THIS NOTICE, UNLESS PREVIOUSLY SUBMITTED.

FAC.NO FACILITY

01 LANDFILL



NOTICE OF REGISTRATION REGISTRATION NUMBER: 32180

COMPANY NAME: TRANSWESTERN PIPELINE CO.

DW0550

TEXAS DEPARTMENT OF WATER RESOURCES
NOTICE OF REGISTRATION
INDUSTRIAL SOLID WASTE GENERATION/DISPOSAL

07-17-85

THIS IS NOT A PERMIT AND DOES NOT CONSTITUTE AUTHORIZATION OF ANY WASTE MANAGEMENT ACTIVITIES OR FACILITIES LISTED BELOW. REQUIREMENTS FOR SOLID WASTE MANAGEMENT ARE PROVIDED BY TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TEXAS DEPARTMENT OF WATER RESOURCES (TOWR). CHANGES OR ADDITIONS TO WASTE MANAGEMENT METHODS REFERRED TO IN THIS NOTICE REQUIRE WRITTEN NOTIFICATION TO THE TOWR.

DATE OF NOTICE: 07-15-85

REGISTRATION DATE: 10-15-81

REGISTRATION NUMBER: 32180

EPA I.D. NUMBER: TXD000729046

THE REGISTRATION NUMBER PROVIDES ACCESS TO STORED INFOR-MATION PERTAINING TO YOUR OPERATION. PLEASE REFER TO THAT NUMBER IN ANY CORRESPONDENCE.

COMPANY NAME: TRANSWESTERN PIPELINE CO. MAILING ADDRESS: PYOTE PLANT AND STATION

P.O.30X 1188 HOUSTON, TEXAS

77001

GENERATING SITE LOCATION:

FROM PYOTE, S ON HWY 1927 7 MI THEN EAST 2 MI

CONTACT PERSON: DAVID BAYS

PHONE: (713) 654-6109

NUMBER OF EMPLOYEES: 25 - 49

TOWR DISTRICT: 10

REGISTRATION STATUS: ACTIVE REGISTRATION TYPE: GENERATOR

HAZARDOUS WASTE STATUS: NON-HANDLER

I. WASTE GENERATED:

WAST NUMB		CLASS	CODE	DISPOSITION
001	ORGANICS, COMBUSTIBLE & WATER	I	109750	ON-SITE/OFF-SITE
002	OILY WASTEWATER	I	109760	ON-SITE/OFF-SITE
003	AMINE FILTEPS	I	173470	ON-SITE 1201908

NOTICE OF REGISTRATION (C. TINUED)
REGISTRATION NUMBER: 32180
COMPANY NAME: TRANSWESTERN PIPELINE CO.

II. SHIPPING/REPORTING: PURSUANT TO TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWN PERTAINING TO INDUSTRIAL SOLID WASTE MANAGEMENT, ISSUANCE OF MANIFESTS AND MONTHLY REPORTING ARE REQUIRED FOR OFF-SITE STORAGE/PROCESSING/DISPOSAL OF THE FOLLOWING CLASS I WASTES LISTED IN PART I.

PREPARE A MONTHLY WASTE SHIPMENT SUMMARY AND SUBMIT IT ALONG WITH THE GREEN COPY OF THE MANIFEST(S) FOR EACH MONTH THAT SHIPMENTS OF THE FOLLOWING WASTE(S) ARE MADE. NO MONTHLY WASTE SHIPMENT SUMMARY IS REQUIRED FOR MONTHS WHEN SHIPMENTS ARE NOT MADE.

GO1 189750 ORGANICS, COMBUSTIBLE & WATER

002 109760 CILY WASTEWATER

III. ON-SITE WASTE MANAGEMENT FACILITIES:

FAC NO	D. FACILITY	STATUS
01	SURFACE IMPOUNDMENT	ACTIVE
	STORAGE	
	OF WASTE NUMBER(S) 001	
	CONCRETE 100 X 34 X 6 FT.	
. 9 2	SURFACE IMPOUNDMENT	ACTIVE
	STORAGE	
	OF WASTE NUMBER(S) 002	
·	CONCRETE 50 X 50 X 6 FT.	
03	INCINERATOR	ACTIVE
	PROCESSING/DISPOSAL	
	OF WASTE NUMBER(S) 003	
	LOCATED AT #32258-KEYSTONE PLT	
	· · · · · · · · · · · · · · · · ·	

UNLESS OTHERWISE STATED ABOVE, FACILITIES ARE LOCATED
AT FROM PYOTE, S ON HWY 1927 7 MI THEN EAST 2 MI
COUNTY OF WARD

IV. RECORDS.

A. FOR PURPOSES OF FILING ANNUAL REPORTS PURSUANT TO TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWN PERTAINING TO INDUSTRIAL SOLID WASTE MANAGEMENT, RECORDS 1201909 SHOULD RE MAINTAINED FOR STORAGE, PROCESSING AND/OR DISPOSAL OF THE FOLLOWING WASTE(S) LISTED IN PART I:

001 109750 ORGANICS, COMBUSTIBLE & WATER

002 109760 OILY WASTEWATER

NOTICE OF REGISTRATION (C.TINUED)
REGISTRATION NUMBER: 3218D
COMPANY NAME: TRANSWESTERN PIPELINE CO.

GO3 173470 AMINE FILTERS

NOTICE OF REGISTRATION REGISTRATION NUMBER: 32154

TRANSWESTERN PIPELINE CO. COMPANY NAME:

DW 05 50

TEXAS DEPARTMENT OF WATER RESOURCES NOTICE OF REGISTRATION INDUSTRIAL SOLID WASTE GENERATION/DISPOSAL 07-17-85

THIS IS NOT A PERMIT AND DOES NOT CONSTITUTE AUTHORIZATION OF ANY WASTE MANAGEMENT ACTIVITIES OR FACILITIES LISTED BELOW- REQUIREMENTS FOR SOLID WASTE MANAGEMENT ARE PROVIDED BY TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TEXAS DEPARTMENT OF WATER RESOURCES (TDWR). CHANGES OR ADDITIONS TO WASTE MANAGEMENT METHODS REFERRED TO IN THIS NOTICE REQUIRE WRITTEN NOTIFICATION TO THE TOWR.

DATE OF NOTICE: 07-15-85

REGISTRATION DATE: 08-15-81

REGISTRATION NUMBER: 32154

EPA I.D. NUMBER: TXD000729012

THE REGISTRATION NUMBER PROVIDES ACCESS TO STORED INFOR-MATION PERTAINING TO YOUR OPERATION. PLEASE REFER TO THAT NUMBER IN ANY CORRESPONDENCE.

COMPANY NAME:

TRANSWESTERN PIPELINE CO.

MAILING ADDRESS: WT-II STATION

P.C. EOX 1188

HOUSTON

77001

GENERATING SITE LOCATION:

15 MI W OF KERMIT OFF HWY 302, HALREY RD, POB 1059

CONTACT PERSON: DAVID BAYS

PHCNE: (713) 654-6109

NUMBER OF EMPLOYEES: 1 - 7

TDWR DISTRICT: 10

REGISTRATION STATUS: ACTIVE REGISTRATION TYPE: GENERATOR

HAZARDOUS WASTE STATUS: GENERATOR

WASTE GENERATED:

WASTE NUMBER

DESCRIPTION

CLASS CODE DISPOSITION

001 NATURAL GAS CONDENSATE CONTAIN IH 902730 ON-SITE/OFF-SITE ING HEAVY METALS

> EPA HAZARDOUS WASTE NOS. (REFER TO 40 CFR PART 261 FCR DESCRIPTIONS): DOO'4

1201911

002 WASHWATER

II 208110 ON-SITE

PLANT REFUSE, GENERAL MISC. II 279760 ON-SITE

•

NUTICE OF REGISTRATION (C.TINUED)
REGISTRATION NUMBER: 32154

COMPANY NAME: TRANSWESTERN PIPELINE CO.

B. PROOF OF RECORDATION IN THE COUNTY DEED RECORDS, AS REQUIRED BY TEXAS ADMINISTRATIVE CODE SECTION 335 OF THE RULES OF THE TOWR, SHOULD BE SUBMITTED TO THE EXECUTIVE DIRECTOR FOR THE FOLLOWING FACILITIES LISTED IN PART III IN ACCORDANCE WITH THE FOLLOWING SCHEDULES:

NEW FACILITIES - PRIOR TO INITIATION OF DISPOSAL OPERATIONS.

EXISTING FACILITIES - AS SOON AS POSSIBLE, BUT NO LATER THAN SIXTY (60) DAYS FROM THE DATE OF THIS NOTICE, UNLESS PREVIOUSLY SUBMITTED.

FAC NO FACILITY

D3 LANDFILL

	&EPA	NOTIFIE						US W			TIVI	ry					f you			•		
	INSTALLA- TION'S EPA												infor	matic	on on	the	a spai Jabei Giy t	is in	com	HCt, d	rew a	line
ŀ	I.D. NO.											l	in th	e ap	propr	iate	sectio ct, le	n be	iow.	if t	ne lat	ei is
ł	L STALLATION																did i					
ı	II. MAILING	D.	7 E A S	E D1 /	ACE.	TAD	er '	IN TU	10 CB	۸	•		single	site	whe	ere h	azard /or d	ous	wast	e is :	jen en	sted,
ļ	ADDRESS	P	LEAS	E PL	AC E	LAB	EL	IN TH	12 2F	ACE			porte	17'S P	rincip	oal pi	lace d	of bu	sine	ss. Pl	ease	refer
1															-		ONS compl	_		_		
	LOCATION IIL OF INSTAL- LATION											1				•	ed he			•	•	
	LATION														Acti.	_						
¥ H	FOR OFFICIAL	USE ONLY	De No				unific		u jak	32		Sec.	-	i de della			42.9	State (er in	7.1-1		er per win.
ETA		· · · · · · · · · · · · · · · · · · ·					COM	MENTS													عمالية	
S	Ċ																					
ı	INSTALLATI	ION'S EPA I.D.	NUMB	ER	AP	PROV	ED	DATE (yr., r	RECEI													į
	Ė		$\top \top$	TIA C		П				П												
	I. NAME OF INS	TALLATION		-1500		30	494 January	TO PROPERTY.	ries.	7.2 (C) (C)		ne contra		2 (7)	W E	the second		Court	1 2 A	1100		di Sec. 13
I	STATIO																					
	II. INSTALLATI		ADD	DECC	- Oct	Sec. Sec.		7000				S QUESTION OF			1	المرسد الا	er a	4		121		e in the
	II. INSTALLATI	ON MAILIN		TREET				*********	1111111			A A A A	AL AR					ننداله	A		Tion 1	
	3 P . O .	вох	2 5 2	2 1																		
	18 118		CITY	OR TOY	VN :						ST.	ZIP	COD									
۱	4 HOUST	ON	TT	П	П	TT			TI	T^{\dagger}	TY	7 7	ol o	1								:
١	III. LOCATION		ATIO		n dends		5 (A)A		al jugale	10	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	20000		31	ari Cal	deleter.	e ches	and the		م د د د		
ł	III. EUCATION			T OR R					in the same		A. O.A.E.	f et menne de			A. Para	- C			3. M. S			2
					T				$\neg \neg$	$\neg \neg$!
1	5 P O B O X	3 8 7				11				11	-		ł									1
	5 P O B O X	3 8 7	CITY	DR TON	/NO				<u></u>		ST.		COD									
	15 18 C		CITY (P YOW	/N				<u> </u>			ZIP	CODI									
	6 C A P I T	AN	Ш	Щ	П			AFI AF			N M	8 8	3 1	6				AM	ana):		N. Jest	
	6 CAPIT	A N ONTA	СТ	Щ	3.5 A			title)		40	N M	8 8	3 1	6			rea c				+2 9	,
	6 C A P I T	A N I	СТ	- Light	3.5 A				EN	 V	N M	8 8	3 1	6							142	
	6 C A P I T	A N I	CT ME ANI	TITLE R D	E (last.	first.	<i>∆ job</i> M G	title)	EN	V	N M	8 8 T R	3 1 L 7	6 PMC	3	7 5	9	5	3	., 5 5		
H A	6 C A P I T IV. INSTALLAT	A N ONTA	CT ME ANI	TITLI	(last.	first.	<i>∆ job</i> M G	title)	E N	V	N M	8 8 T R	3 1 L 7	6 PMC	3	7 5	9	5	3	., 5 5		
TACH A	C A P I T IV. INSTALLAT Y O U N G V. OWNERSHIP	A N ONTA	CT ME ANI	TITLI	(last.	first.	<i>∆ job</i> M G	R R	E N	<i>y</i>	N M	8 8 T R	3 1 L 7	6 PMC	3	7 5	9	5	3	., 5 5		
¥ =	C A P I T IV. INSTALLAT V. OWNERSHIP	A N I L	CT ME AND	A NA	E (last.	first.	M G	R R ATION N E DOUS	E N	V O M	N M	8 8 T R N Y	3 1 - - L 7	6	3.	7 5	9	5 5	3 !	5 5	2.50	
ETACH A	C A P I T IV. INSTALLAT V. OWNERSHIP	A N I L WEST	E R	A NA	E (last.	first.	M G	R R ATION N E DOUS	E N	V O M	N M	T R N Y	3 1 - - L 7	[6]	3 -	7 5	9	5 32	3 box	5 5 5 3	2.65	
ETACH A	C A P I T IV. INSTALLAT V. OWNERSHIP TRANS (enter the appropri	A N I L W E S T	CT ME AND	A NA	E (last.	FINST F HA	M G	R R ATION N E DOUS	E N C C	V O M	N M	R R Y (en	3 1 L 7	6 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	n the	7 5	grea c	5 32 32 32 32 32 32 32 32 32 32 32 32 32	3 box	5 5 5 3	2.65	
ETACH A	C A P I T IV. INSTALLAT V. OWNERSHIP R A N S (enter the appropri	A N I L WEST	E R I	A. AA.	I F	F INST	M G TALL I ZAR	R R ATION N E DOUS	E N S LEG C WAST	O M E AC	N M C N P A	T R N Y	3 1 L 7	6 Ji	n the	7 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	grea c	5 32 32 32 32 32 32 32 32 32 32 32 32 32	3 box	5 5 5 3	2.65	
ETACH A	C A P I T IV. INSTALLAT Y O U N G V. OWNERSHIP TRANS TRANS (enter the appropri	A N I L WEST	E R	A. AA.	PE OI	F HA	M G TALL I ZAR	R R ATION N E DOUS	E N C C WAST	O M E AC	N M C N P A TIVI	T R N Y	3 1 1 L 7 TRAN	PHO I	in the	7 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	grea c	5 32 32 32 32 32 32 32 32 32 32 32 32 32	3 box	5 5 5 3	2.65	
A DETACH A	C A P I T IV. INSTALLAT V. OWNERSHIP TRANS (enter the appropriate the suppopriate the supp	A N I L NAME OF THE PROPERTY O	E R I	A. MA VI. TY (trans	PE OI	F HA	A job M G M G L I L I ZAR ERAT	R R R R R R R R R R R R R R R R R R R	E N C C WAST	V O M E AC	N M C N VNER P A TIVI	R R R R R R R R R R R R R R R R R R R	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(A)	n the	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	propri (com	5 5 13 13 13 13 13 13 13 13 13 13 13 13 13	box	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
A DETACH A	C A P I T IV. INSTALLAT V. OWNERSHIP TRANS TRAN	A N I L I L I WE S T I DERAL TRANSPORT	E R MATION	A. NA. VI. TY I (trans	E (last. T PE OI A TION her this	F HA. GENE TREA	M G TALL I ZAR ERAT AT/ST	R R R R R R R R R R R R R R R R R R R	E N C C WAST	V O M E AC	N M C N WNER P A TIVIT	T R N Y Y (en	L 7	(A)	n the	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	propri (com	5 5 13 13 13 13 13 13 13 13 13 13 13 13 13	box	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
A DETACH A	G C A P I T IV. INSTALLAT V. INSTALLAT V. OWNERSHIP R A N S Center the appropri	A N I L I L I WE S T I DERAL TRANSPORT	E R MATION	A. NA. VI. TY I (trans	E (last. T PE OI A TION her this	F HA. GENE TREA	M G TALL I ZAR ERAT AT/ST	R R R R R R R R R R R R R R R R R R R	E N C C WAST	V O M E AC	N M C N WNER P A TIVIT	T R N Y Y (en	L 7	(A)	3 - 11111111111111111111111111111111111	7 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	propri (com	iate plata	box item	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	i	ANGER STATE
A DETACH A	C A P I T IV. INSTALLAT V. INSTALLAT V. OWNERSHIP R A N S R A N S REPLETA F = FEDERA M = NON-FE VIII. MODE OF I A. AIR VIII. FIRST OR Mark "X" in the application of this is not your file.	A N I L I L I WE S T I DERAL TRANSPORT	E R I	A. NA. VI. TY I (trans	PE OI STORY	F HA. GENI TREA TREA TREA TREA TREA TREA TREA TREA	A John G	R R R R R R R R R R R R R R R R R R R	E N S LEG C WAST WAST ATER A' in 'A' in	V O M E AC	N M C N WHER P A TIVI	T R R Y (en D. L Triate b)	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(A)	3 - 11111111111111111111111111111111111	7 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	graph (com	iate plata	box item	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	i	ANGER STATE
A DETACH A	C A P I T IV. INSTALLAT V. INSTALLAT V. OWNERSHIP R A N S R A N S REPLETA F = FEDERA M = NON-FE VIII. MODE OF I A. AIR VIII. FIRST OR Mark "X" in the application of this is not your file.	A N ION CONTA	E R MATION OF INDICES OF THE PROPERTY OF THE P	A. NA. VI. TY (trans cs c. rific A te whet your ins	E (last, T). PE OI A. I F I F I F I F I F I F I F I	F HA. GENE TREZ TREZ TREZ TREZ TREZ TREZ TREZ TRE	A John G	R R R R R R R R R R R R R R R R R R R	E N S LEG C WAST WAST ATER A' in 'A' in	V O M E AC	N M C N WHER P A TIVI	T R R Y (en D. L Triate b)	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(A)	3 - 11111111111111111111111111111111111	7 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	graph (com	iate plata	box item	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	i	ANGER STATE

EPA Form 8700-12 (6-80)

CONTINUE ON REVERSE

•			· [2	W. I I	
IX. DESCRIPTION OF HAZ	ARDOUS WASTES (con	tinued from froi	11)		
A. HAZARDOUS WASTES FROM waste from non—specific source				OCFR Part 261.31 for	each listed hazardous
1 27 - 16 7	2 13 - 16 8	3	10	23 26	23 - 21
22	27		13 16	23 2.35	13
B. HAZARDOUS WASTES FROM specific industrial sources your	M SPECIFIC SOURCES. Er	nter the four—digit dditional sheets if s	number from 40 CFR (Part 261.32 for each ii	sted hazardous waste from
12 - 29 19 28	28	15 21 21 27	16 22 22 28	23 24 23 29 29	24
C. COMMERCIAL CHEMICAL P stance your installation handle			faur-digit number fro		3 for each chemical sub-
31 32 - 10 37 33 - 26 43 33 - 36	38 23 - 24 23 23 44 24 23 33 - 24 33	39 39 48 48 48	23 · 26 40 23 · 26 46	25 23 - 20 41 23 - 26 47	23 - 26 42 42 48 23 - 25
D. LISTED INFECTIOUS WAST hospitals, medical and research					from hospitals, veterinary
49	33 - 16 33	81 	52	93	23 - 26
E. CHARACTERISTICS OF NOI hazardous wastes your installa	N—LISTED HAZARDOUS I tion handles. (See 40 CFR)	WASTES. Mark "> <i>Parta 261.21 — 261</i>	(" in the boxes corresponded. 24.)	onding to the characte	ristics of non-listed
(Deet)	[2. CO#	ROSIVE	3. REAGTI	VR	₩4. TO XIC (0000)
X. CERTIFICATION	and a serie terror designation	Liver a security and	nt constant and the	settement of high	新加州市政治社会
I certify under penalty of attached documents, and the submitted mitting false information, in	hat based on my inquiry I information is true, ac	of those individual scurate, and com of fine and impris	duals immediately re plete. I am aware th onment.	esponsible for obtains there are significant there are significant.	ining the information.
SIGNATURE			Young, Mgr. E	•	DATE SIGNED
		1		and the state of t	

EPA Form 8700-12 (6-80) REVERSE

I.D. - FOR OFFICIAL USE ONLY

CONTINUE ON DEVENO

VIII. FIRST OR SUBSEQUENT NOTIFICATION Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below. C. INSTALLATION'S EPA I.D. NO. X B. SUBSEQUENT NOTIFICATION (complete item C) A. FIRST NOTIFICATION 10 10 Ю 2 19 מו 10 15

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

	·	I.D FOR OFF	ICIAL USE ONLY
		w	
IX. DESCRIPTION OF HAZARDOUS WASTES (con	tinued from front)		
A. HAZARDOUS WASTES FROM NON—SPECIFIC SOURCE waste from non—specific sources your installation handles		10 CFR Part 261.31 for (ech listed hazardous
1 2	3 4		6
		1111	
23 - 36 23	9 10	15 - 10	12
tried brief by	r id brid	 i 	
23 - 20 23 - 16 25	. 16 73 - 29	13 - 16	- N
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. E specific industrial sources your installation handles. Use a		Part 261.32 for each lis	ted hazardous waste from
13 14	15 16	17	18
13 - 16 23 - 16 33	· 14 23 · 14	23 - 25	23 - 16
19 20	21 22	23	24
25 26 25	27 29	29	30
		73 75	
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS W	ASTES. Enter the four-digit number fr		for each chemical sub-
stance your installation handles which may be a hazardou	s waste. Use additional sheets if necessar	y.	
31 32	33 34	35	36
23 · 16 23 · 16 25 37	39 40	41	42
25 - 26 22 - 16 23	- 36 33 · 16	23 - 14	23 - 26
	48	47	48
D. LISTED INFECTIOUS WASTES. Enter the four-digit no	umber from 40 CFR Part 261.34 for each	listed hazardous waste f	rom hospitals, veterinary
hospitals, medical and research laboratories your installati			
49 50	51 52	53	94
23 · 20 23 · 10 23	- 16 23 - 16	23 - 20	22 - 20
E. CHARACTERISTICS OF NON-LISTED HAZARDOUS hazardous wastes your installation handles. (See 40 CFR)	WASTES. Mark "X" in the boxes corresp		
Ŏ1. IGNITABLE □2. COI (D001) (D002)	ROSIVE 3. REACT]4. TOXIC
X. CERTIFICATION			
I certify under penalty of law that I have persona attached documents, and that based on my inquiry I believe that the submitted information is true, ac mitting false information, including the possibility of	of those individuals immediately in curate, and complete. I am aware t	responsible for obtain	ing the information.
SIGNATURE	NAME & OFFICIAL TITLE (type or pr	int)	DATE SIGNED
1) landlown	WILLARD T. YOUNG		11/19/80
miles 12 15	MANAGER, ENVIRONMENTAL	PROTECTION	טפוריויי

SEPA	NOTIFICAT	ION OF HAZ					•	ceived a preprinte
INSTALLA- TION'S EPA LD. NO.			· .			information through it	on the label is in and supply the	t left, If any of the neorrect, draw a line correct informational elow. If the label
I. STALLATION						complete ar	d correct, leave	Items I, II, and II
INSTALLA-					i	label, comp	lete all items. "Ir	nstallation" means waste is generated
II. MAILING ADORESS	PLEA	SE PLACE L	ABEL IN T	HIS SPAC	CE	treated, sto	red and/or dispo	usiness. Please refe
					:	to the INST	TRUCTIONS FO	R FILING NOTIFI
LOCATION IIL OF INSTAL- LATION					:	information	requested herein	is required by lav
						Recovery A	: ಬ.	
FOR OFFICIAL	USE ONLY				the Earth			
ā III			COMMEN	Î				П
15 16	ON'S EPA I.D. NUM	INED APP	ROVED DAY	RECEIVE	<u> </u>			1.0
FILE		7/A C	79.	mo., & day)	┪			
	TALLATION			THE PERSON NAMED IN				
STATIO								
30	ON MAILING AD	DRESS					17	
		STREET OR P.C						
3 P O B O	x 2521							
70110	CITY	OR TOWN		····	SY. ZIF	CODE		
4 HOUST	ON				TX77	إيامايا		
	OF INSTALLATION	ON		4 C 5 4 5				
		ET OR ROUTE	HUMBER	TITT	1111	Н		
5 P 0 B 0	X 6 1					••		
2.1.1.1.1.1.		OR TOWN	ППТ	Π	1717	CODE		
6 L A G U N	ION CONTACT				NM817	01216		
IV. INSTALLAT		NO TITLE (last,	first, & job title)				E NO. (area code	
2 Y O U N G	, WILLA	R D - M G	R, ENV	. PR	TECT	713	-759-5	3 5 5
V. OWNERSHIP			- AFRENCH			45 46 - 44	49 - 31 52	
C		A. NAME OF	INSTALLATIO	TIT	OWNER			T 1
8 T R A N S	WESTER	N PIP	E L I N E	1 1 1 1 1 1				98
(enter the appropri	OWNERSHIP into box)			S WASTE			the appropriate	
F = FEDERA			GENERATION		<u>ਜ਼</u>		'ATION (complet	
	RANSPORTATIO	<u> </u>	TREAT/STORE		80		NOITOBLNI GNU	4
A. AIR	B. RAIL	C. HIGHW		WATER		R (specify):	4 0	01918
••	SUBSEQUENT NO	43		- Taranta			12	A T A T
Mark "X" in the ap	propriate box to indi	icate whether this	is your installat	ion's first no		zardous waste	activity or a subs	equent notification.
in una la riot your is	ier incuircation, dille	. your matematic			Property of the policy E	_	C. INSTALLATIO	ON'S EPA I.D. NO.
A. PIRST	NOTIFICATION	X a. su	eseguent no	TIFICATION	4 (complete ite:	70 C)		
tons	N OF HAZARDO		_		en anne a mar a	N	O D O D I	17 2 9 9 9 4
	erse of this form and		extent information	arindrindi (filia) T			and district the stage should	Total de la constantina

•				WIII	7/4 =
IX. DESCRIPTION OF HA	ZARDOUS WASTE	S (continued from	front)		
A. MAZARDOUS WASTES FRI waste from non-specific sou	OM NON-SPECIFIC	SOURCES. Enter the	four-digit number from		
B. HAZARDOUS WASTES FRO	23 14 15 15 15 15 15 15 15 15 15 15 15 15 15	23 - 16 9 0ES. Enter the four—C	a - 10 10 10 10 10 10 10 10 10 10 10 10 10	11 11 123 - 34 R Part 261.32 for each	12 12 13 - 26 listed hazardous waste from
specific industrial sources you	23 - 36 20 28 - 26 25 - 26	15 15 22 - 36 21 23 - 26 27	16 16 22 22 28 28 28 23 - 26	23 - 26 23 - 20 25 - 20	24 24 30 123 - 24 25 25 25 26 25 26 25 26 26 26 26 26 26 26 26 26 26 26 26 26
C. COMMERCIAL CHEMICAL stance your installation hand					33 for each chemical sub-
27 - 14 - 27 - 29 - 29 - 29 - 29 - 29 - 29 - 29	38 38 38 44 44	23 · 10 25 · 26 45 · 26 · 26 · 26 · 26 · 26 · 26 · 26 · 2	23 · 36 46 23 · 26	38 23 - 14 41 33 - 26 47	36 23 · 26 42 48 23 · 20
D. LISTED INFECTIOUS WAS hospitals, medical and research	TES. Enter the four- ch laboratories your in	digit number from 40 stallation handles. Us	CFR Part 261.34 for eac e additional sheets if nec	h listed hazardous wast	e from hospitals, veterinary
E. CHARACTERISTICS OF NO	S6 23 · 24 2N-LISTED HAZARI	B1 1 23 25 25 DOUS WASTES. Mari	52 123 - 28 127 - 28	53 23 - M spanding to the charact	s4
hazardous wastes your install [2] 1. IGRITABLE (D001)		1. CORROSIVE	261.24.)	TIVE	□4. TOXIC (D000)
X. CERTIFICATION I certify under penalty of attached documents, and I believe that the submitted mitting false information.	that based on my i ed information is tr	ersonally examined inquiry of those inc rue, accurate, and c	lividuals immediately omplete. I am aware	responsible for obta	tining the information.
EPA Form 9700-12 (6-90) RE	VERSE.	WILLARD	T. YOUNG T. ENVIRONMENTAL	***	11/19/80

	W	<u> </u>
IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)		The Research of Landing
A. HAZARDOUS WASTES FROM NON—SPECIFIC SOURCES. Enter the four—digit number from waste from non—specific sources your installation handles. Use additional sheets if necessary.	40 CFR Part 261.31 for	r each listed hazardous
1 2 3 4	8	•
7 9 9 10	23 - 26	12
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFI specific industrial sources your installation handles. Use additional sheets if necessary.	R Part 261.32 for each I	isted hazardous waste from
13 14 15 16	17	110
19 20 21 22	53	24
	22 - 24	
28 26 27 28	29	30
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four—digit number f stance your installation handles which may be a hazardous waste. Use additional sheets if necessar	rom 40 CFR Part 261,3 ry.	3 for each chemical sub-
21 32 33 36	38	36
37 38 39 40	41	48
42 44 45 46	47	46
D. LISTED INFECTIOUS WASTES. Enter the four—digit number from 40 CFR Part 261.34 for each hospitals, medical and research laboratories your installation handles. Use additional sheets if necessity.		from hospitals, veterinary
49 50 51 52	53	34
23	73 - 13	23
E. CHARACTERISTICS OF NON—LISTED HAZARDOUS WASTES. Mark "X" in the boxes corres hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24.)	ponding to the character	ristics of non—listed
[D001] [D002] [D003]		☐4. TOXIC (D000)
X. CERTIFICATION		
I certify under penalty of law that I have personally examined and am familiar with attached documents, and that based on my inquiry of those individuals immediately I believe that the submitted information is true, accurate, and complete. I am aware mitting false information, including the possibility of fine and imprisonment.	responsible for obtai	ning the information.
SIGNATURE NAME & OFFICIAL TITLE (type or p.	rint)	DATE SIGNED
WILLARD T. YOUNG MANAGER, ENVIRONMENTAL	PROTECTION	11/19/80
		The same with the control of the same and th

1

	©EPA		ENVIRONMENTAL PETION OF HAZARI			INSTRUC					
	INSTALLA- TION'S EPA I.D. NO.					label, affix information through it in the app	n on the and sup ropriate	label is sply the section	incorre e correc below,	et, draw t inform If the la	a line nation ibel is
	I. STALLATION					complete a	ık, if yol	did n	ot receiv	e a prepi	rinted
	INSTALLA- TION II. MAILING ADORESS	PLE	ASE PLACE LABE	L IN THIS SPA	CE	label, com single site treated, st porter's pr	where hored and incipal p	azardo for dis lace of	us waste posed o busines	is gener f, or a s. Please	rated, trans- refer
	LOCATION IIL OF INSTAL- LATION		•			to the INS CATION Informatio (Section 3) Recovery	before n reques 010 of th	comple ted her	ting thi ein is re	s form, quired b	The y law
Ą	<u> </u>			us s atte rus ärking av aksallak	54	nacovery /					
TACF	FOR OFFICIAL	USE ONLY		OMMENTS						1800	1.5.7
ADE	ċ								11	7	
	15 16	ION'S EPA I.D. NU	MBER APPROVE	DATE RECEIVE		<u> </u>			31	5	
	F		1 1								
	I. NAME OF INS	TALLATION	All the second second	200 12 4 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5		Con Copies	ti ja lai		n design		
	STATIO	N 4									
	II. INSTALLATI	ON MAILING A	STREET OR P.O. BOX		The state of the s						
	3 P . O .	B 0 X 2 5	5 2 1								
	13 16	CIT	Y OR TOWN		ST. ZII	CODE			•		
	4 H O U S T	ON			T X 7 7	0 0 1			•••		
	III. LOCATION	OF INSTALLAT	ION	is a secure near		98 april 200	er alle			ALL YES	
	5 P O B O X		EET OR ROUTE NUMB	ER							
	10 110	CIT	Y OR TOWN		ST. 215	CODE					
	6 SANDE	RS			A Z 8 6						
	IV. INSTALLAT	ION CONTACT	Ad various for	and Mark States and an	20 20 20 20		A description	-Crain and	1		
			AND TITLE (last, first, &			PHO	NE NO.	area co	de & no.		
	2 Y O U N G	, WIILLI	AIRIDI ITI.I, M	GR ENV	CINITIR	L / []	3-71	1 3 -	5 3 5	5 5	
	V. OWNERSHIP			LLATION'S LEGA		A STATE OF	可以重要在	करूर्ड <u>ः</u>	10.		er di
ACH	8 TRANS	WESTEI	RNPIPEL	INE CO	MPANY			\Box	TT		
DET	15 16	OWNERSHIP	VI. TYPE OF HAZ	ARDOUS WASTE	ACTIVITY (e	nter "X" ii	n the ap	propri	ite box	(es)) 3	
∢	F - FEDERA	L	X A. GENE	RATION	H	TRANSPOR				VII)	
	M = NON-FE	34	59	F/STORE/DISPOSE		UNDERGR	OUND IN	JECTI	ON		
			(ON (transporters only								
	A. AIR	42	C. HIGHWAY	•••				<u></u>		1922	
			NOTIFICATION Dicate whether this is you		otification of ha					t notifie	ation
			ter your Installation's EP								
	_						C. INST	ALLAT	TION'S	PA 1.0.	NO.
		r NOTIFICATION		JENT NOTIFICATIO	ON (complete iter	1					
		ON OF HAZARD	OUS WASTES	nformation.		A MARKET		6.有些			or early
	I. were do to the tea	U. 1113 /UIIII dill	requested !!					CON			

والمراجعة والمعالية والمنطقة والمنطقة والمنافر والمنطقة و

		,	ĪÄ	4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
IX. DESCRIPTION OF HAZ	RDOUS WASTES (ontinued from front	/		
A. HAZARDOUS WASTES FROM waste from non-specific source			digit number from 40	·	ach listed hazardous
B. HAZARDOUS WASTES FROM specific industrial sources your	SPECIFIC SOURCES.			11 11 23 - 26 23 - 25 25 - 25 27 261,32 for each list	12 - 26 12 12 13 14 15 16 16 16 16 16 16 16 16 16 16 16 16 16
19	20	15 21 21 22 27	16 22 22 23 20 20	17 10 16 23 23 29	24
C. COMMERCIAL CHEMICAL P				22 24 261.33 (lor each chemical sub-
stance your installation handle	s which may be a hazard	Ous waste. Use addition	al sheets if necessary.	35	36
37	33 · 36 38 · 36 44 · 36	25 · 26 39 22 · 24 45	23 - 25 40 23 - 16 46	23 - 26 48 23 - 26 47	23 · 26 42 23 · 26 48
D. LISTED INFECTIOUS WAST! hospitals, medical and research					rom hospitals, veterinary
E. CHARACTERISTICS OF NON hazardous wastes your installar	LISTED HAZARDOL			83 23 - 26 Inding to the characteris	54 23 - 26 stics of non-listed
W 1. IGNITABLE (DÖÖ1)	(D002)	ORROSIVE	3. REACTIV		4. TOXIC 000)
X. CERTIFICATION I certify under penalty of attached documents, and the I believe that the submitted mitting false information, in	at based on my inqui information is true,	ury of those individu accurate, and comp	am familiar with the state of t	sponsible for obtains	nitted in this and all ing the information.
SIGNATURE	-DCE	1	LTITLE (type or prin Young, Mgr. Er	.	DATE SIGNED

EPA Form 8700-12 (6-80)

Form Approved OMB No. 158-S79016

CONTINUE ON REVERSE

•	<u> </u>	
IX. DESCRIPTION OF HAZARDOUS WASTES (con	ntinued from front)	
A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCE waste from non-specific sources your installation handles	CES. Enter the four—digit number from 40 CFR Part 261.31 for to use additional sheets if necessary.	each listed hazardous
to the state of t	• • •	•
23 - 38 - 38 23	23 23 24 25 26	23 - 24
		18
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. E specific industrial sources your installation handles. Use a	nter the four—digit number from 40 CFR Part 261.32 for each i	isted hazardous waste from
13 14 14	10 16 17	18
		23 - 18
	21 23	24
25 26	27 28 29	25 20
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS Was stance your installation handles which may be a hazardou	VASTES. Enter the four—digit number from 40 CFR Part 261.3 weste. Use additional sheets if necessary.	3 for each chemical sub-
31 32 i 33 i 33 i 34 i 34 i 34 i 34 i 34 i	:53 34 25	16
		- B
37		
43 44	45 47	48
		23 - 16
D. LISTED INFECTIOUS WASTES. Enter the four-digit of hospitels, medical and research laboratories your installat	umber from 40 CFR Part 281.34 for each listed hazardous weste on handles. Use additional sheets if necessary.	from hospitals, veterinary
49 , 12 , 14 , 14 , 14 , 14 , 14 , 14 , 14	52 53 53 53 53 53 53 53 53 53 53 53 53 53	54
10 10 10 10 10 10 10 10 10 10 10 10 10 1		23
Aszardous wastes your installation handles. See 40 CFR	RECEIVE	₹ 4. TO XIC
X. CERTIFICATION	the control of the state of the	(D000)
I certify under penalty of law that I have persona attached documents, and that based on my inquiry	ully examined and am familiar with the information sulve of those individuals immediately responsible for obtaining the complete. I am aware that there are signifi-	omitted in this and all ining the information,
SIGNATURE	NAME & OFFICIAL TITLE (type or print) Willard T. Young	DATE SIGNED
	Manager, Environmental Protection	

ATTACHMENT

TRANSWESTERN PIPELINE COMPANY

STATION 3 - Location: T 22 N, R 14 E, Coconino Co., A 40, Navaho Indian Reservation, Leupp, Arizona

	Q EFA	NOTIFICAT		HAZARE									d a preprinted
	INSTALLA- TION'S EPA I.D. NO.							i t i	nformat hrough n the ap	ion on it and opropri	the labe supply, ata secti	I is incorr the corre on below	t. If any of the ect, draw a line ect information. If the label is as I. II. and III.
	L STALLATION							E	elow bi	ank, if	you did	not recei	ve a preprinted
	INSTALLA- TION II. MAILING					*							ation" means a te is generated,
ļ	II. MAILING ADDRESS	PLEA	ASE PLA	CE LABE	L IN TH	IS SPAC	E		-				of, or a trans-
4	LOCATION IIL OF INSTAL- LATION						•	t O iii	the III CATION oformat	NSTRU befor ion red 3010 d	CTIONS	FOR Fi pleting the nerein is r	LING NOTIFI- nis form. The required by law conservation and
ACH	FOR OFFICIAL	USE ONLY	united and			網施開							
ET/	<u> </u>		1 1 1		OMMENTS	111	111		T	1 1			
Y	C											111	
		ON'S EPA I.O. NU	MBER	APPROVED		O & May)		-					لت
	F		7/A C				1						
	I. NAME OF INS	TALLATION			70000000	S-5450	- Francest	HAM SOM		Carle Is	neser th	MANIE AND	
	STATIO	N 2										,	
į	II. INSTALLATI	ON MAILING AI	DRESS	47							-		
			TTTT	P.O. BOX	111	111	T 1 T	11	4				
	3 P.O.	B 0 X 2 5	2 1					Ш	_				
-	19 16	CIT	Y OR TOWN	,		· · · · · · · · · · · · · · · · · · ·	ST.	ZIP C	ODE	1			
	4 HOUST	ON					TX	7 7 0	1 0 0				
- 1	15 18		- Control of			1 1 1	47 42 4		31	C ^C ity (S)	C. C. Marketta		
				7777777	DEPTH STREET								and the second state of th
	III. LOCATION (UTENUMBE						10.50			
		STRE		UTE NUMBE				T		10-74			
	III. LOCATION C			UTE NUMBE									
	5 P O B O X	3 7 0 CITY					ST.	ZIPC	ODE				
	5 P O B O X	3 7 0	ET OR RO				эт. А Z 8	ZIP C	0 1				
	5 P O B O X	3 7 0 CITY	OR TOWN		R			ZIP C	0 1				
	5 P O B O X	3 7 0 CITY T A F F	OR TOWN		42 (2004)			ZIP C	0 1		(i) and the	code & no	
	F L A G S IV. INSTALLAT	3 7 0 CITY T A F F CONTACT NAME A	OR TOWN	(last, first, &)	G R E	And	ST. A Z 8	ZIP C B 6 0	0 1 7 1	3-1	0. (area 7 5 9	- 5 3	5 5
	F L A G S IV. INSTALLAT	3 7 0 CITY T A F F CONTACT NAME A	OR TOWN	(last, first, &	ob atte)	NV	ST. A Z 8	ZIP C B 6 0	0 1 7 1	3-1	0. (area 7 5 9	- 5 3	5 5
cu A	F L A G S IV. INSTALLAT Y O U N G V. OWNERSHIP	3 7 0 CITY T A F F CONTACT NAME A	OR TOWN	(last, first, &)	G R E	N V	ST. A Z 8	ZIP C B 6 0	0 1 7 1	3-1	0. (area 7 5 9	- 5 3	5 5
STACH Å	F L A G S IV. INSTALLAT Y O U N G V. OWNERSHIP	TAFF ION CONTACT NAME A , WILLA WESTER	OR TOWN NO TITLE R D	(last, first, & T , M.	G R E	N V	ST. A Z 8	ZIP C 3 6 0	0 1 PHG	3 - 1	5. (area 7 5 9	5 3	5 5
DETACH A	F L A G S IV. INSTALLAT Y O U N G V. OWNERSHIP	TAFF ION CONTACT NAME A , WILLA WESTER	OR TOWN NO TITLE R D A. NAM N P	(last, first, &) T . , M E OF INSTAI	G R E	N V	ST. A Z 8	ZIP C B 6 0 T R L N Y Y (enter	0 1 31 7 1	one no	5. (area 7 5 9.	- 5 3	5 5
A DETACH A	F L A G S IV. INSTALLAT Y O U N G V. OWNERSHIP T R A N S A N S A N S A N S A N S A N S A N S A N S	ION CONTACT NAME A WESTER WESTER	OR TOWN NO TITLE R D A. NAM N P	(last, first, & T , M.	G R E	N V	ST. A Z 8	ZIP C B 6 0 T R L N Y Y (enter	0 1 31 7 1	one no	5. (area 7 5 9.	5 3	5 5
A DETACH A	F - FEDERAL S P O B O X C S P O B	T A F F CONTACT NAME A WE S T E R OWNERSHIP box) DERAL M M	A. NAM N P	(last, first, &) T., M E OF INSTAIL E OF HAZA A. GENER	GR E	N VI C O M	C N CTIVIT	T R L N Y Y (ente	0 1 7 1	in the	0. (area 7 5 9.	riate box	5 5
A DETACH A	F - FEDERALM - NON-FEI	ION CONTACT NAME A WESTER WESTER WESTER WESTER WESTER WESTER WARRSHIP WESTER WARRSHIP WESTER WARRSHIP W	A. NAM N P VI. TYP	C. TREAT	ob title) G R E LLATION'S I N E LRDOUS V ATION STORE/BI - enter "	N V C O M	C N CTIVIT	TRL NY Y (enta	PHO 7 1 PHO PHO PHO PHO PHO PHO PHO PHO	in the	0. (area 7 5 9.	riate box	5 5
A DETACH A	F - FEDERAL M - NON-FEI VII. MODE OF T	T A F F ION CONTACT NAME A , W I L L A WESTER WESTER WHERSHIP Sie letter into box) DERAL M RANSPORTATIO	A. NAM N P VI. TYP	Cof Instal I PE L OF HAZA A. GENER C. TREAT/ Orters only	GREATION'S INE ATION STORE/DI - enter ")	N V C O M VASTE A SPOSE K"in the	C N CTIVIT	T R L N Y Y (enter ate bo	PHO TANSPO SPECIFY:	in the	appropon (con	riate box	5 5
A DETACH A	F - FEDERAL M - NON-FEI VIII. FIRST OR S	T A F F ION CONTACT NAME A , W I L L A WE S T E R SWEETH INTO BOX1 DERAL M RANSPORTATIO 128. RAIL SUBSEQUENT NO	A. NAM NO TITLE R D VI. TYP) ON (transp	C. TREAT/	OD CITLE) GREATION: INE RDOUS VATION STORE/DI - enter ''	N VI C O M VASTE A	C N CTIVIT	TRIL NY Y (enter	PHO 7 1 7 1 ANSPO PERGIF (es)	in the	appropon (com	riate box	5 5 Silesty
A DETACH A	F - FEDERAL M - NON-FEI VII. MODE OF T	TAFF ION CONTACT NAME A , WILLA WESTER WESTER WESTER WHERSHIP STEELER INTO BOX1 DERAL M RANSPORTATION SUBSEQUENT Not incoming the second contact to incoming the second contac	A. NAM N P VI. TYP Con transp	C. TREAT/	GREATION'S INERPOUS VATION STORE/DI - enter '') installation	N V LEGAL C C O M VASTE A SPOSE K" in the	C N C TIVIT	TRL NY Y (enta D. UN rhen (PHO 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1	in the	appropon (con	riate box	sies)
A DETACH A	F - FEDERAL M - NON-FEI VIII. FIRST OR S Mark "X" in the acc If this is not your fir	TAFF ION CONTACT NAME A , WILLA WESTER WESTER WESTER WHERSHIP STEELER INTO BOX1 DERAL M RANSPORTATION SUBSEQUENT Not incoming the second contact to incoming the second contac	A. NAM NO TITLE R D VI. TYP) ON (transp	C. TREAT/	GR G	N VI LEGAL C C O M VASTE A SPOSE K" in the	C N CTIVIT	Y (enter to be desired below the second seco	PHO 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1	in the	appropon (con	riate box	5 5 Silesty
, V	F - FEDERAL M - NON-FEI VIII. FIRST OR S Mark "X" in the acc If this is not your fir	TAFF ION CONTACT NAME A , WILLA WESTER WESTER WESTER WHERSHIP STEELER INTO BOX1 DERAL M RANSPORTATION STREET SUBSEQUENT Not incoming the notification, anterest	A. NAM NO TITLE R D VI. TYP ON (transp C. H Cotte whether your insta	C. TREAT/ Orters only IGHWAY TON This is your llation's EPA	GR G	N VI LEGAL C C O M VASTE A SPOSE K" in the	C N CTIVIT	TRL NY Y (ento D. UN ate bo.	PHO 1 7 1 7 1 PHO 1 8	in the	appropon (com	riate box riplete item rion subsequer	sies)

			1 1	╎╸ ┸╌┸╌┦╌┦╌┦	
IX. DESCRIPTION OF HAZ	ARDOUS WASTES (co	ontinued from fron	1)		
A. HAZARDOUS WASTES FROM NON—SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.31 for each listed hazardous waste from non—specific sources your installation handles. Use additional sheets if necessary.					
77		3 16 3	23 - 26 10	21 · 28 11 1 23 · 26	73 - 24 12
B. HAZARDOUS WASTES FRO specific industrial sources you	M SPECIFIC SOURCES. r installation handles. Use	Enter the four—digit is additional sheets if n	number from 40 CFR Pa	ort 261,32 for each lis	ted hazardous waste from
13	20 20 25 26	15	22 22 23 28	27 15 29	24
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four—digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.					
31 33 · 14 37 33 · 15 43 13 · 26	32 13 - 55 38 19 - 24 44 13 - 34	39 3 · · · :6 45	34 33 - 34 40 33 - 34 46 46	35 33 · 16 41 33 · 16 47 47 13 · 26	23 · 29 42 33 · 24 48
D. LISTED INFECTIOUS WAST hospitals, medical and research	h laboratories your installa	ition handles. Use add	itional sheets if necessar	y.	
49	30		52	33	23 - :0
E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.) 1. IGNITABLE 2. CORROSIVE 3. REACTIVE X4. TOXIC					
(0001)	(D002)		(0003)	2)	X 4. TOXIC
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.					
SIGNATURE		NAME & OFFICIA	L TITLE (type or print)		DATE SIGNED
		Willard T.	Young, Mgr. En	v. Control	

EPA Form 8700-12 (6-80) REVERSE

	w				
IX. DESCRIPTION OF HAZARDOUS WASTES (confi	tinued from front)				
A. MAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Pert 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.					
	B B B B B B B B B B B B B B B B B B B				
	ind brind brind brind				
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enterprecific industrial sources your installation handles. Use add	ter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from distional sheets if recessory.				
19 16	18 16 17 18				
19 20	21 22 29 24				
┃ ├───┤ ├───┤ ├ ─	*************************************				
<u> </u>					
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WA stance your installation handles which may be a hazardous	ASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical sub- mests. Use additional sheets if necessary.				
91 32	:35 36 36				
37 38	30 40 01 02 M				
	· 48				
D. LISTED INFECTIOUS WASTES. Error the four-digit num hospitals, medical and research laboratories your installation	mber from 40 CFR Pert 261.34 for each listed hazardous waste from hospitals, veterinary in handles. Use additional sheets if necessary.				
40 90 91 11 11	91 82 93 54				
E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (Spy 40 CFR Parts 281.21 - 281.34.)					
₩1. HONITABLE	ROBIVE 3. REACTIVE 34. TOXIC				
(pios)	(Boss)				
X. CERTIFICATION					
I certify under penalty of law that I have personally exemined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for sub-					
I believe that the submitted information is true, accommitting false information, including the possibility of	nurate, and complete. I am aware that there are significant penalties for sub- fine and imprisonment.				
SIGNATURE	NAME & OFFICIAL TITLE (type or print) DAYE SIGNED				
	Willard T. Young Manager Fryironmental Protection 6/15/8/				
<u> </u>	Manager, Environmental Protection				

PA Form #700-12 (6-80) REVERS

1201930

- FOR OFFICIAL USE ON.

Form Approved OMB No. 158's GSA No. 0246-EPA-07 Please print or type with ELITE type (12 characters finch) in the unshaded areas only. U.S. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY INSTRUCTIONS: If you received a preplabel, affix it in the space at left. If any of toinformation on the label is incorrect, draw a line SMSTALLA-TION'S EPA LD. NO. through it and supply the correct information In the appropriate section below, if the label is I STALLATION complete and correct, leave Items I, II, and III below blank, If you did not receive a preprinted label, complete all Items, "Installation" means a INSTALLA-TION MAILING ADDRESS single site where hezerdous waste is generated, treated, stored and/or disposed of, or a trans-PLEASE PLACE LABEL IN THIS SPACE porter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFI-CATION before completing this form. The LOCATION III OF INSTAL-LATION information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Acti. FOR OFFICIAL USE ONLY COMMENTS C I. NAME OF INSTALLATION STREET OR P.O. BOX TIP CODE 7 7 0 0 TIX III. LOCATION OF INSTALLATION STREET OR BOUTE MUMBER TIP CODE 87. 6 MOHAVE IV. INSTALLATION CONTACT PHONE NO. (area code & no.) HAME AND TITLE (last, first, & job title) 17 | 5 | 9 | 15 | 3 | 5 V. OWNERSHIP A. MAME OF INSTALLATION'S LEGAL OWNER (enter the appropriate lefter into box) VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es)) . Da. TRANSPORTATION (complete tope VE) MA. BENERATION F - FEDERAL M . NON-FEDERAL ... G. THEAT/STORE/DISPOSE 🔲 D. UNDERGROUND INJECTION VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(at)) . Де. инения ...D. WATER E. OTHER (spentfy): DO. RAIL VIII. FIRST OR SUBSEQUENT NOTIFICATION री करों है। क्षेत्रक प्रकृति के **दरा र**हाति व "पैक्षित्रका अन्य न के संक्ष्मिक है कि क्षेत्रक के क<mark>्ष्मिक के स</mark>्वापन हो है

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous wests activity or a subsequent notification if this is not your first notification, enter your installation's EPA LD. Number in the space provided below.

IX. DESCRIPTION OF HAZARDOUS WASTES

A. PIRST NOTIFICATION ... I B. BURGERSENT ROTIFICATION (semplete flow C)

C. INSTALLATION'S EPA I.D. NO.

	1.D PG	R OFFICIAL USE ONL		
	w			
IX. DESCRIPTION OF HAZARDOUS WASTES (continued from from				
A. MAZARDOUS WASTES FROM NON—SPECIFIC SOURCES. Enter the fowests from non—specific sources your installation handles. Use additional of	ur-digit number from 40 CFR Part 261			
3 3	4 5	6		
		†		
		12		
		l hiil l		
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—dis- specific industrial sources your installation handles. Use additional sheets if		each listed hezardous waste from		
13 14 18	16 1 17			
		<u> </u>		
10 10 10 10 10 10 10 10 10 10 10 10 10 1	22 23	l 1-34-1		
25 26 27	20 20	20		
		15 - 1 - 16 - 16 - 16 - 16 - 16 - 16 - 1		
C. COMMERCIAL CHEMICAL PRODUCT NAZARDOUS WASTES. Emer ti stance your installation handles which may be a hexartlous weste. Use additionally product of the product of th	e four-digit number from 40 CFR Part	261,33 for each chemical sub-		
22 22 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25	. 24 35	26		
	trind brin	i hiin l		
		┦ ╽╗┦╼┋╼┋ ┤ ╽		
37 38 39	40 41	42		
	44 47	48		
		l friid l		
		13 - 1,		
D. LISTED INFECTIOUS WASTES. Enter the four—digit number from 40 Ci hospitals, medical and research laboratories your installation handles. Use r		waste from hospitals, veterinary		
49 80 1 81	83 83	9.6		
E. CHARACTERISTICS OF MON—LISTED HAZARDOUS WASTES. Mark " hezardous wastes your installation handles. Sky 48 CFR Parts 261.21 — 26	$X^{\prime\prime}$ in the boxes corresponding to the characteristic $1.24.7$	aracteristics of non-listed		
(2501) TE COMMONIVE	DI. REACTIVE	∭4, 70×ič (5000)		
X. CERTIFICATION	化氯化氯磺酚 网络加州 电影景制设施			
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for sub-				
mitting false information, including the possibility of fine and impr				
Willard Joseph Manager, Environmental Protection 6/15/8				
PA Form \$700-16 (6-80) REVERSE				

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-7-81)

I. BACKGROUND

II. CONDENSATE SAMPLING

1. (a) Three locations on the contaminated portion of the system where the largest volume of gas is supplied to distribution companies.

RESPONSE: No gas is supplied directly to a distribution company from the contaminated portion of the system. (Reference Part II Item 2).

(b) One utility sales point in each state supplied by a contaminated portion of your system.

RESPONSE: No utility sales points are supplied with gas in the states traversed by the contaminated portion of the system.

(c) One distribution supply location on a section of system which is not contaminated.

LOCATION SELECTION: Cities Service - Canadian sales point, Hemphill County, Texas.

2. Three points on the contaminated portion of the system where gas is supplied to other transmission companies.

LOCATION SELECTION: The only point on the contaminated portion of the system where gas is supplied to another transmission company is to Pacific Lighting Service Company at Needles, Mohave County, Arizona.

3. Three consendate collection points within the contaminated portion of the system (excluding sales and interchange points) where large yolumes of condensate are normally found.

LOCATION SELECTIONS:

	Collection Location	Sampling Point
(1)	Compressor Station No. 2	Scrubber Pit
	Flagstaff, Arizona	
(2)	Compressor Station No. 5	Scrubber Pit
	Thoreau. New Mexico	
(3)	Compressor Station No. 7	Scrubber Pit
,	Mountainair New Mexixo	

4. Three locations where gas is purchased from another transmission company.

RESPONSE: Gas is not normally purchased from another transmission 1201933 company anywhere on the contaminated portion of the system.

5. One point where gas is received from an underground storage field on the contaminated portion of the system.

RESPONSE: Gas is not received from an underground storage field anywhere on the contaminated portion of the system.

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

6. (a) One location downstream and upstream of points where new equipment such as filter/separators, scrubbers, drips, etc. are installed as part of remedial effort.

RESPONSE: Not applicable at this time.

(b) Condensate sampling before and after other remedial steps such as pigging are carried out.

ACTION PROPOSED: Pipeline samples will be taken before and after pigging performed for PCB cleanup purposes.

III. CONDENSATE REMOVAL

Volume of condensate collected from those points chosen for monitoring in Part II above.

ACTION PROPOSED: Accumulate information on condensate collected at the following locations

- a. Cities Service Canadian, Hemphill County, Texas
- b. Pacific Lighting Service Company, Needles, Mohave County, Arizona
- c. Compressor Station No. 2, Flagstaff, Arizona
- Compressor Station No. 5, Thoreau, New Mexico Compressor Station No. 7, Mountainair, New Mexico
- 2. Total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 50 to 500 PPM.

ACTION PROPOSED: Accumulate quantities of condensate collected in the system from Compressor Station No. 8 - Corona. New Mexico to Pacific Lighting sales point at Needles, Arizona.

Total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 500 PPM or greater.

RESPONSE: PCB concentrations in the contaminated portion of the system do not normally run above 500 PPM.

IV. GAS STREAM SAMPLING

Gas stream sampling to be conducted in conjunction with condensate samples at the major sales points selected for condensate sampling (Part II, No. 1 above) using the June, 1981 "Method to Measure PCBs in Natural Gas Pipelines," EPA 600/4-81-048 (method section pages A-1 thru A-16). One gas sample to be 1201334 collected at each of the three points as follows:

- (1) February, 1982
- (2) June, 1982
- (3) September, 1982
- (4) February, 1983

RESPONSE: No major sales points are designated for condensate sampling under Part II, No. 1 above. However, one gas sample will be collected at

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

the Pacific Lighting sales point at Needles, Arizona in accordance with the above schedule.

V. QUALITY ASSURANCE - TECHNICAL ASSISTANCE

EPA is to make available two "check" samples of pipeline condensate containing a known quantity of PCBs for analysis by laboratories utilized during this program.

ACTION PROPOSED: Labs to be used are as follows:

- (1) Primary LabTexas Eastern Analytical Laboratory
 Texas Eastern Gas Pipeline Company
 P. O. Box 2521
 Houston, Texas 77001
 Attention: Mr. Douglas Dodds
- (2) Alternate Lab
 Southern Patroleum Laboratories Inc.
 8880 Interchange
 P. 0. Box 20807
 Houston, Texas 77054
 Attention: Mr. Sammy Russo

IV. SUBMISSION OF INFORMATION

- 1. An initial report is required to be submitted to EPA by January 12, 1982 to include:
 - (a) List of exact location of sampling sites including type of sampling point (scrubber, drip, etc.) and category under which the point falls in Part II above.

RESPONSE: See information furnished for Part II above. Condensate samples will be collected at meter station facilities, except as otherwise noted.

(b) A list of condensate collection points for reporting under Part III above if condensate is not removed at the exact location where samples will be collected.

RESPONSE: It is proposed that all condensate collected for reporting under Part III will be collected at the facility location.

(c) A system map indicating the location of sampling points (Part II) and 1935 condensate collection points (Part III).

RESPONSE: See attached system map.

(d) The name, address, and contact person at each laboratory used.

RESPONSE: Reference Part V above.

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

2. Monitoring reports to be submitted as follows:

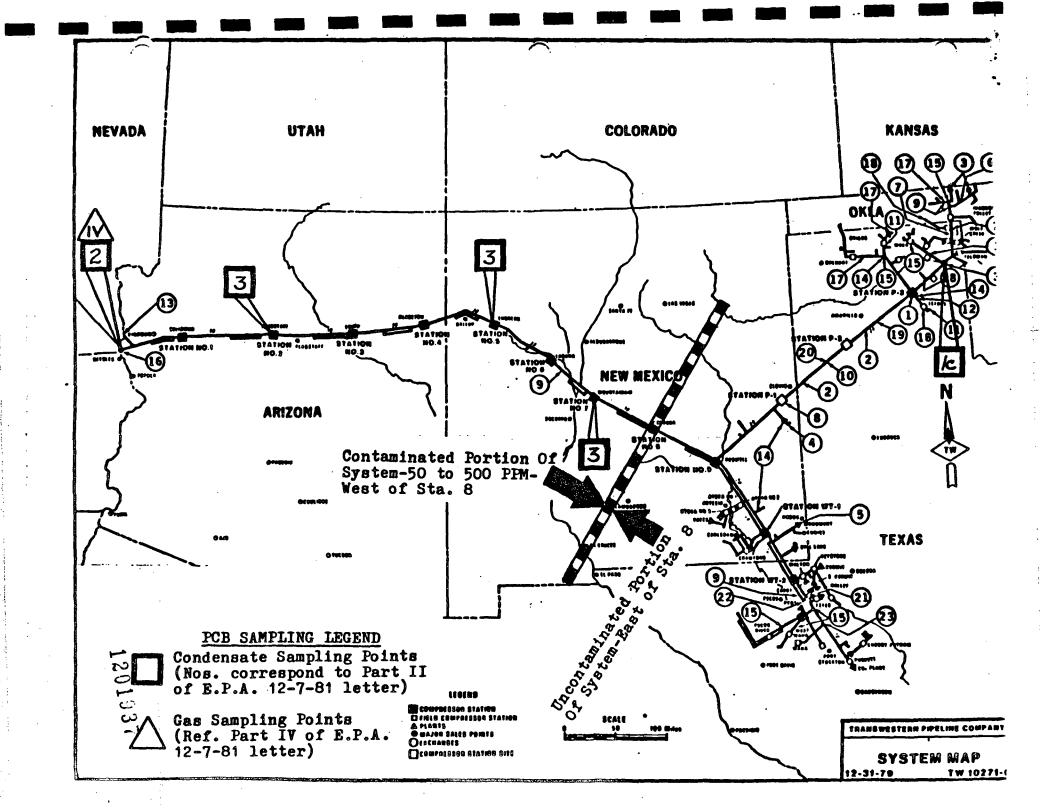
For Samples

Report Date Collected During

January 15, 1982 December, 1981 April 15, 1982 January-March, 1982 July 15, 1982 June, 1982

October 15, 1982 September, 1982
January 15, 1983 October-December, 1982
April 15, 1983 January-March, 1983

ACTION PROPOSED: Because of the timing of the receipt of the EPA letter and the time needed to develop and implement the monitoring plan, it is proposed that sampling will commence with the January-March, 1982 sampling period, reportable April 15, 1982.





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION VI 1201 ELM STREET DALLAS, TEXAS 75270

CERTIFIED MAIL: RETURN RECEIPT REQUESTED

July 2, 1986

Mr. Richard Tavelli Transwestern Pipeline Company P. O. Box 1188 Houston, Texas 77001

Dear Mr. Castie:

We have no objection to the cleanup plan attached to your letter of May 1, 1986, except for the proposed cleanup levels. After reviewing the circumstances and the cleanup policy being developed by our Headquarters, we believe that cleanup to 25 ppm or less should be achieved on Transwestern property. However, we are prepared to allow some flexibility if unusual circumstances are encountered during the course of the cleanup.

We note that we will be provided with results of samples taken adjacent to the Corona facility. We are reserving judgment on cleanup levels for the adjacent area until we have more information. Please advise us of the owner and use of this property.

We also note that steps have been taken to control access to contaminated areas and minimize the potential for further migration of PCBs. However, we believe that cleanup of the contaminated areas should proceed as soon as possible. Therefore, we request submission of a complete cleanup schedule for all sites within 30 days of receipt of this letter.

Sincerely yours,

William B. Hathaway

Director

Air, Pesticides and Toxics Division

cc: Mr. Robert Castle
Project Manager
Woodward-Clyde Consultants
100 Pringle Avenue, Suite 300
Walnut Creek, California 94596-3564

Woodward-Ciyde Consultants

416-946-3000 May 1, 1986 90158B-6006

war it Greek CA 94596-3564

U.S. Environmental Protection Agency Region VI Pesticides and Toxics Branch InterFirst Two Building, 1201 Elm Street Dallas, Texas 75270 MAY 2 1985

PORCS SECTION

Subject: Transwestern Pipeline Company - PCB Cleanup

Attention: Mr. Darl Mount

Dear Sirs:

Appended is our plan for the cleanup of PCB contaminated materials at Transwestern Pipeline Company facilities in EPA Region VI. At the present time, the plan is, of necessity, conceptual in nature. The disposal options ultimately selected are dependent on the cleanup levels to be followed and the amount of contaminated material involved. Our primary objective at this time is to agree on cleanup levels for the facilities in Region VI. We are investigating the cost effectiveness of various disposal options which will accomposate materials generated in both EPA Region VI and IX. Some of the information required to accomplish this goal will be generated under a Consent Agreement with EPA Region IX, and will require additional time to incorporate in our planning. Detailed plans and specifications will be provided for your review as soon as they are developed.

In the interim, Transwestern has taken a variety of steps to minimize the potential spread of contamination through changes in operational practices and control of access to areas of known contamination. An additional measure taken at the Corona facility in early April involved the re-engineering of site drainage control, including the construction of sediment basins, to minimize potential offsite migration of surface contaminants.

Offsite sampling was conducted at Corona during the week of April 14, 1986. Analytical results should be available in several weeks, at which time they will be provided to you.

We will contact you regarding your comments on our plan for the cleanup plan within 14 days. Please feel free to call me if you have any questions prior to that time.

Sincerely

Robert W. Castle Project Manager

lat W. Cast

RWC:bv 2535c* 1201339

Consulting Engineers. Geologists and Environmental Scientists

Offices in Other Principal Cities



April, 1986

PCB Cleanup Plan Transwestern Pipeline Company Facilities in EPA Region VI

INTRODUCTION

This cleanup plan specifically addresses cleanup of PCB contaminated liquids, sludges, and soils at Transwestern Pipeline Company facilities within Environmental Protection Agency (EPA) Region VI. It provides for the incineration of PCB-contaminated liquids/sludges held in open surface impoundments. It also addresses treatment of PCB-contaminated soils within certain contamination ranges. Conceptually, the plan assumes that contaminated soil will be excavated and that the resulting material will be either transported to the Corona Station for final treatment or shipped directly to an alternate disposal/treatment site.

Detailed cleanup plans and specifications will be developed upon the completion of these investigations and the identification of a preferred disposal option(s). In the interim period, steps have been taken to minimize the spread of existing contamination, limit employee exposure, and reduce recontamination.

Objective:

It is the intention of the cleanup plan to: 1) remove and dispose of existing contaminated liquids and sludges from surface impoundments; 2) remove and dispose of contaminated surface soils and replace them with clean material; and 3) remove and dispose of contaminated subsurface soils to the degree practical and environmentally acceptable. Activities which have been undertaken to date have included removal and incineration of some of the contaminated fluids, sampling to identify the extent of contamination, isolation or posting of areas of elevated concentrations, and modifications in work practices which could result in contamination.

1201040

Approach:

Transwestern facilities under consideration for cleanup in EPA Region VI are shown in figure 1. The following discussion is divided into approaches for liquid/sludge and soil.

Liquids:

PCB contaminated liquids are known to exist within EPA Region VI in the Mountainair impoundment (at the pig receiver) and in above ground storage tanks. Only material in the open impoundments is of concern to this cleanup effort. Liquids contained in the surface tanks are removed and incinerated periodically as part of standard operating practice. Liquids and sludges at Mountainair will be removed by vacuum truck, sampled, and destroyed by incineration according to accepted procedure. After removal, the impoundment will be temporarily closed to prevent its accumulation and contamination of surface runoff, until such time as a final cleanup plan is developed. Temporary closure will be accomplished by filling the impoundment with contaminated soil from the surrounding area, covering it with an impermeable membrane, and controlling drainage around the area.

A summary of impoundments in EPA Region VI which are believed to have received significant amounts of PCB-contaminated material and their current status are shown in Table 1.

Table 1. Impoundments Potentially Contaminated
(EPA Region VI as of April 1985)

<u>Facility</u>	Impoundment	Volume (bbl)
Thoreau	unlined	closed 1976-8
	lined	0
Grants	none	0
Laguna	lined	closed 1985
Rio Grande	none	0
Belen	none	0
Belen Blowdown	none	0 4
Mountainair	unlined	filled 1984
•	lined	159
Corona Pig Receiver	none	0
Corona	unlined	closed 1983
•	unlined	closed 1984
	unlined	closed 1984

In addition to the impoundments shown in Table 1, five other impoundments have been identified at two Transwestern Facilities in EPA Region VI.

These include two impoundments at Thoreau and three impoundments at Moutainair.

At Thoreau, there is a concrete-lined impoundment which receives engine room washdown fluids, and an unlined surface water runoff collection impoundment. At Mountainair, there is a concrete-lined impoundment which receives engine room washdown fluids, and two unlined surface water runoff collection impoundments. Material collected from the concrete-lined impoundment at Thoreau (located near the bottom of the unlined surface runoff impoundment) has a PCB level of 2.50 mg/kg. At Mountainair, an sediment from one of the unlined impoundments has a PCB level of 20.0 mg/kg, and a sample from the engine room washdown impoundment had 0.29 ppm PCB.

Additional samples will be taken from the bottom sludges of each impoundment where data does not currently exist, or concentrations are very low. This additional data will be used to determine handling and disposal requirements.

Soils:

Localized and irregular soil contamination occurred as a result of impoundment leakage, surface spills, and general operations at the compressor stations and at other smaller pipeline maintenance points. Sampling and analysis conducted in 1985-6 by Woodward-Clyde Consultants indicated the presence of surface soil contamination associated with existing and former impoundments. In general, the contaminated material is very viscous or asphaltic and is not believed to be subject to high migration potential. Since most of the impoundments have been closed, the major mechanisms for future contaminant migration is rainfall, surface runoff, and infiltration. The major potential receptor for contamination so mobilized is local groundwater.

Table 2 presents the average rainfall and known depth to groundwater for representative locations. In all cases the average rainfall is relatively low, and the evapotranspiration rate high, resulting in little driving mechanism for moving contamination downward. With the exception of Laguna and Belen, the depth to groundwater is great, reducing the potential for any mobilized material from reaching groundwater. In the latter areas, no indication of significant soil contamination at depth have been observed in sample results to date.

Table 2. Representative Rainfall and Groundwater Data

<u>Facility</u>	Average Annual <u>Rainfall</u> (inches)	<u>Evapo-trans</u> (inches)	Depth to Groundwater (feet)
Thoreau	12	high	300+
Laguna	15	high	25
Belen	8-12	60+	to 50
Mountainair	13	60	600+-
Corona	15	high	380

Based on soil sampling and analysis, areas of contamination at the major sites (compressor stations) have been identified and divided into zones having 50-500 and >500 mg/kg PCB (as per CFR Title 40, Chapter 1, Subchapter R, Part 761, Subpart D) as shown on figures 2 to 5. In general the 50-500 mg/kg level of contamination appears to be associated with spills and other surface sources. The higher and deeper levels of contamination appear to be associated with existing and former impoundments.

EXCAVATION PLAN

The following general excavation criteria has been developed to specify the volume of material requiring excavation and disposal. The criteria are based on available analytical data, and are subject to revision during actual excavation:

 Prior to excavation, additional samples will be taken from the fringes of the contaminated zones as necessary to define their lateral boundaries. These samples will be analyzed in the field using a Transwestern mobil gas chromotographic laboratory which will be brought to the site.

- 2. In areas designated as the 50-500 mg/kg range, the upper 6 inches of soil will be removed. The bottom of the excavation and surrounding buffer zone will then be composite sampled (using EPA PCB Spill Cleanup Verification Procedures EPA 560/5-85-026) and analyzed to identify areas having residual concentrations in excess of 50 mg/kg. Additional 6-inch layers will be removed from each remaining area with >50 mg/kg until composite residual concentrations of < 50 mg/kg are achieved or a depth of 2 feet below grade is reached. Excavations will be backfilled with compacted and stabilized clean material, resulting in zero net surface contamination. If concentrations of >500 mg/kg are detected at the 2 foot level, criteria no. 3 will then apply.
- 3. In areas designated as >500 mg/kg, soil will be removed in multiple foot stages until residual levels of <500 mg/kg as shown by composite sampling are achieved. Available data suggest that this criteria can typically be met with excavation depths of about 5 feet, although the need for a deeper excavation is indicated along the SE facility boundary at the Corona station. Table 3 presents anticipated excavation depths based on existing information and presents PCB concentrations observed in soil samples from various sites remaining at or below anticipated excavation depths.

Table 3. Observed PCB Concentration Below Anticipated Excavation Depths

Anticipated <u>Excavation Depth</u> (feet)	Observed PCB Concentration (mg/kg @ ft)
0.5 - 1.0	n.s.
5.0	48 @ 5.0
5.0	2.65 @ 7.0
no action	2.19 @ 0.0
	-
0.5 - 1.0	n.s.
5.0+	43.5 @ 9.0
0.0	no conc. over 5.0
0.5	n.s.
0.5	n.s.
no action	8.3 @ 0.0
0.5	n.s.
no action	no conc. over 50.0
5.0 - 10.0	130 @ 15.0
no action	no conc. over 1.25
no action	only one localized positive reading on McGraw-Edison Test
	:
0.5 - 2.0	to 1262.25 @ 1.0
0.5 - 2.0	33.0 @ 3.0
	350.5 @ 3
7.0 - 10.0	1407 @ 7.0
	Excavation Depth (feet) 0.5 - 1.0 5.0 5.0 no action 0.5 - 1.0 5.0+ 0.0 0.5 0.5 no action 0.5 no action 5.0 - 10.0 no action no action 0.5 - 2.0 0.5 - 2.0 3.0 - 4.0

n.s. = no sample

Anticipated excavation depths may be increased or decreased according to field observations. In cases where very low surface concentrations were observed at sites having very low human exposure, no cleanup actions are recommended. In the event that unexpected contamination at depth is encountered and excavation is impractical a re-evaluation of the criteria will be necessary. All deeper excavations will be backfilled with clean material and stabilized. In all cases, samples will be collected from the bottom of each excavation for verification of the final cleanup level and analyzed according to EPA protocol.

In summary, all areas excavated will be backfilled with clean material having no residual PCB contamination. In addition, PCB concentrations greater than 50 mg/kg will be removed to a depth of 2 feet and no PCB concentration exceeding 500 mg/kg will be left at any depth unless its removal is not feasible.

Based on available data, we believe that the above criteria will result in the removal of PCB's at all areas cleaned up in EPA Region VI to levels less than 50 mg/kg, with the exception of two localized areas at the Mountainair and Corona facilities where some material having residual PCB concentrations less than 500 mg/kg will be left in place unless their removal is not feasible. Given the remoteness, low rainfall, and great depth to groundwater at Mountainair and Corona, it does not appear that the presence of small quantities of residual PCB contamination presents a significant environmental risk.

Considering environmental conditions, the low mobility of the contaminants, and that the facilities in question are secured operating units of the Transwestern Pipeline System, we believe that the proposed cleanup plan presents a reasonable and environmentally acceptible remedial approach.

SCHEDULE

The cleanup schedule is tied to the selection of disposal alternatives. Selection of an alternative is dependent on estimation of the total amount of material requiring disposal.

Liquids and sludges in the confirmed contaminated impoundment will be removed for incineration immediately. Samples of bottom sludge will be collected from the remaining active liquid-bearing impoundments and analyzed for PCB content within the next 30 days. Appropriate cleanup actions will be taken pending test results.

some of the options we are currently reviewing become more cost effective if material generated from cleanup in EPA Region IX is combined with that in EPA Region VI. We currently anticipate initiation of the EPA Region IX sampling program by no later than mid-July, with completion of analysis within 90 days of start. We anticipate identification of the preferred disposal method (or methods) during this period. If land filling is selected, removal operations can theoretically proceed at any time. If onsite treatment is selected, preliminary estimates suggest that at least 6 to 9 months will be required to obtain any necessary permits for temporary operation. To expedite the permitting operation, we are assuming EPA cooperation and are conducting preliminary inquires with the relevant state agencies in regard to permit requirements and permit fast-tracking.

TRANSWESTERN Pipeline Company

A TEXAS EASTERN COMPANY

August 24, 1984

Mr. Ray Henry Austin, Head Storage and Processing Facilities Unit Solid Waste Section Texas Department of Water Resources P. O. Box 13087 Capitol Station Austin, TX 78711

Mr. Austin:

Attached please find an original signed and notarized Affidavit of Exclusion for Transwestern's Keystone Plant in Winkler County, Texas. This is to replace the Affidavit which was mailed on February 29, 1984. Also, this is in response to a telephone call from Mr. Hartmann on July 20, 1984.

If you have any questions or require more information, please let me know.

Sincerely,

Gerald H. Walker

Manager, Operational Compliance

PCS:pn

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

bxc: G. W. Comanich

J. C. Elmore

P. W. Fisher

A. B. Jarnagin

R. J. Kruse

C. R. Shadowens

C. L. Truby

File: R8.1703C

AFFIDAVIT OF EXCLUSION FROM HAZARDOUS WASTE PERMITTING REQUIREMENT

Registrat	ion No.	·
Application		
Facility I	(Dept. Use Only) Name	
County of		
councy of		
	F. L. Cohagan	_ being duly sworn, deposes and says:
I am	Senior Vice President	of <u>Transwestern Pipeline Company</u>
	Title (Owner or Principal Officer) P. O. Box 2521 Houst	Facility Owner con, TX 77252
	and Address	
This affic	davit is being executed for the pur	pose of notifying the Executive Director
of the Tex	xas Department of Water Resources t	that the named facility does not require
a hazardo:	us waste permit because:	
	·	
Check app	ropriate box(es):	
	No hazardous waste is stored, prod	
	The facility qualifies for the "Ac Texas Administrative Code, Section	ccumulation Time" storage exclusion of 335.69
	The facility qualifies for the "Sm Texas Administrative Code, Section	mall Quantity Generator" exclusion of 335.2(e)
	The facility qualifies for the "El of Texas Administrative Code, Sect	ementary Neutralization Unit" exclusion tion 335.2(f)
	The facility qualifies for the "Wa Texas Administrative Code, Section	astewater Treatment Unit" exclusion of a 335.2(f)
	Other (Explain with an attachment *See attached letter dated Februar	ry 8, 1984, to Minor Brooks Hibbs 🔝 🗘
		O'L Cohagan PJK Signature
	before me this	ce President, Transwestern Pipeline Company
-34 TE	day of Migust, 1984.	Notary Public in and for
	v	
	· · · · · · · · · · · · · · · · · · ·	County, Suppl 1950
	Ms	commission expires Que 14.1988
		commission expires July 14,1988
		▼

Note: y Pablic in Fracis County, Texas

TRANSWESTERN Pipeline Company

A TEXAS EASTERN COMPANY

February 8, 1984

Mr. Minor Brooks Hibbs, Head WasteDisposal Control Unit Solid Waste Section Texas Department of Water Resources P. O. Box 13087, Capitol Station Austin, Texas 78711

Dear Mr. Hibbs:

Transwestern Pipeline Company is requesting that the following facilities and their respective non-hazardous waste be de-listed and removed from TDWR jurisdiction:

	WASTE NO.	DESCRIPTION	CLASS	CODE
1. Halley Plant TDWR #32179	001	Waste water-oil- Blowdown MEA & TEG	INH	107090
	002	Plant refuse, General Misc.	II,	279760
•	003	Amine Filters	INH	173470
2. Keystone TDWR #32258	001	Misc. Plant Waste	II	270770
1DWR #32230	002	Waste water	II	208110
	003	Cooling water Blowdown	INH	100530
	004	Amine Filters	INH	173470
3. Pyote Plant & Station	01	Organics, combustible and water	INH	109750
	02	Oily wastewater	INH	109760
	03	Amine Filters	INH	173470

Based on our prior conversation regarding the jurisdiction of the Rail-road Commission rather than the Department, over non-hazardous gas plant wastes and pressure maintenance or repressuring plants wastes, Transwestern will in the near future file appropriate notifications with the Railroad Commission regarding the above wastes. If our understanding that the Department does not have jurisdiction over non-hazardous gas plant waste, etc., is incorrect, 1201951 please advise us immediately.

Mr. Minor Brooks Hibbs February 8, 1984 page 2

If there are any questions regarding this transmittal please contact Mr. Charles Shadownes at (713) 759-4394.

Thank you,

Gerald H. Walker

Manager, Operational Compliance

CRS:ag

CERTIFIED - RETURN RECEIPT REQUESTED

TRANSWESTERN Pipeline Company

A TEXAS EASTERN COMPANY

February 8, 1984

Mr. Minor Brooks Hibbs, Head WasteDisposal Control Unit Solid Waste Section Texas Department of Water Resources P. O. Box 13087, Capitol Station Austin, Texas 78711

Dear Mr. Hibbs:

Transwestern Pipeline Company is requesting that the following facilities and their respective non-hazardous waste be de-listed and removed from TDWR jurisdiction:

	WASTE NO.	DESCRIPTION	CLASS .	CODE
1. Halley Plant TDWR #32179	001	Waste water-oil- Blowdown MEA & TEG	INH	107090
	002	Plant refuse, General Misc.	II	279760
	003	Amine Filters	INH	173470
2. Keystone TDWR #32258	001	Misc. Plant Waste	II	270770
1DWR #32236	002	Waste water	II	208110
·	003	Cooling water Blowdown	INH	100530
,	004	Amine Filters	INH	173470
3. Pyote Plant & Station	01	Organics, combustible and water	INH	109750
	02	Oily wastewater	INH	109760
	03	Amine Filters	INH	173470

Based on our prior conversation regarding the jurisdiction of the Rail-road Commission rather than the Department, over non-hazardous gas plant wastes and pressure maintenance or repressuring plants wastes, Transwestern will in the near future file appropriate notifications with the Railroad Commission regarding the above wastes. If our understanding that the Department does not have jurisdiction over non-hazardous gas plant waste, etc., is incorrect, 120155 please advise us immediately.

Mr. Minor Brooks Hibbs February 8, 1984 page 2

If there are any questions regarding this transmittal please contact Mr. Charles Shadownes at (713) 759-4394.

Thank you,

Gerald H. Walker

Manager, Operational Compliance

CRS:ag

CERTIFIED - RETURN RECEIPT REQUESTED

AFFIDAVIT OF EXCLUSION FROM HAZARDOUS WASTE PERMITTING REQUIREMENT

Registrat	ion No.		
Application	on No		
Facility!	(Dept. Use Only) Name		
County of			
			•
	F. L. Cohagan	being duly sworn, deposes and	says:
I am	Senior Vice President	of Transwestern Pipeline	Company
	Title (Owner or Principal Officer) P. O. Box 2521 Houston	Facility Owner , TX 77252	· :
	and Address		
This affic	davit is being executed for the purpo	ose of notifying the Executive	Director
of the Te	xas Department of Water Resources tha	at the named facility does not	require
a hazardo	us waste permit because:		
Check appr	ropriate box(es):		
		•	•.
	No hazardous waste is stored, proces	ssed or disposed on-site	
	The facility qualifies for the "Accu Texas Administrative Code, Section 3		on of
	The facility qualifies for the "Smal Texas Administrative Code, Section 3		n of
	The facility qualifies for the "Elem of Texas Administrative Code, Section	mentary Neutralization Unit" ex on 335.2(f)	clusion
	The facility qualifies for the "Wast Texas Administrative Code, Section 3	tewater Treatment Unit" exclusi 335.2(f)	on of
	Other (Explain with an attachment ar *See attached letter dated February		1 de
		Signature	_ 7K
Culone de l		President, Transwestern Pipeli	ne Company
Sworn to	before me this, 198		· · · · · · · · · · · · · · · · · · ·
		Notary Public in and for	
	·	County,	1201955
	My o	commission expires	

TRANSWESTERN Pipeline Company

A TEXAS EASTERN COMPANY

February 8, 1984

Mr. Minor Brooks Hibbs, Head WasteDisposal Control Unit Solid Waste Section Texas Department of Water Resources P. O. Box 13087, Capitol Station Austin, Texas 78711

Dear Mr. Hibbs:

Transwestern Pipeline Company is requesting that the following facilities and their respective non-hazardous waste be de-listed and removed from TDWR jurisdiction:

	WASTE NO.	DESCRIPTION	CLASS	CODE
1. Halley Plant TDWR #32179	001	Waste water-oil- Blowdown MEA & TEG	INH	107090
	002	Plant refuse, General Misc.	II	279760
	003	Amine Filters	INH	173470
2. Keystone TDWR #32258	001	Misc. Plant Waste	II	270770
1DWK #32236	002	Waste water	II.	208110
	003	Cooling water Blowdown	INH	100530
	004	Amine Filters	INH	173470
3. Pyote Plant & Station	01	Organics, combustible and water	INH	109750
	02	Oily wastewater	INH	109760
	03	Amine Filters	INH	173470

Based on our prior conversation regarding the jurisdiction of the Rail-road Commission rather than the Department, over non-hazardous gas plant wastes and pressure maintenance or repressuring plants wastes, Transwestern will in the near future file appropriate notifications with the Railroad Commission regarding the above wastes. If our understanding that the Department does not have jurisdiction over non-hazardous gas plant waste, etc., is incorrect, please advise us immediately.

Mr. Minor Brooks Hibbs February 8, 1984 page 2

If there are any questions regarding this transmittal please contact Mr. Charles Shadownes at (713) 759-4394.

Thank you,

Gerald H. Walker

Manager, Operational Compliance

CRS:ag

CERTIFIED - RETURN RECEIPT REQUESTED

bcc: F. L. Cohagan
G. W. Comanich
J. C. Elmore
P. W. Fisher
E. S. Hargis
Earl Humble
R. J. Kruse
C. R. Shadowens
C. L. Truby
File: R8.1503C
R8.1703C

Blind Note: We have already made a similar request to the TDWR for Puckett Plant and WT-II's non-hazardous waste. As soon as we hear from the TDWR and data is available, we plan to proceed with RRC notification of all TE and TW non-hazardous waste generated in Texas. Also, we are waiting for some test results on the slurry sweet process at Marquerite-Humphries and our lawyers' decision with regard to PCBs generated at Joaquin before we de-list these two facilities. If the data on the last 2 come in before this letter is approved, we will add them on. Please be advised that INH under Class on the draft stands for Class I non-hazardous waste. 120137

TRANSWESTERN © Pipeline Company

A TEXAS EASTERN COMPANY

WILLARD T. YOUNG MANAGER ENVIRONMENTAL PROTECTION TECHNICAL SERVICES DIVISION



November 17, 1982 OUR REF: 559-82

Very truly yours,

Mr. Tom Patterson Louisiana Department of Natural Resources Hazardous Waste Management Division P. O. Box 44396 Baton Rouge, Louisiana 70804

Dear Mr. Patterson:

Please find attached a hazardous waste notification form for Transwestern Pipeline Company's Puckett Plant as a hazardous waste generator. This facility has EPA I. D. Number TXD095437216.

We have made arrangements to dispose of the waste generated from this plant in a Louisiana disposal facility and require a Louisiana hazardous waste generator number before we can begin this activity. We would appreciate being contacted by phone to be informed as soon as possible when a number has been assigned. Please contact Anita Cuevas at (713) 759-5318.

ANC/jm Attachment

bcc: H. D. Church

S. M. Dougherty

J. C. Elmore

R. J. Kruse w/attachments

J. R. Stoker

G. H. Walker w/attachments /

7-cc R8:1703C C12-81201058

STATE OF LOUISIANA

Hazardous Waste Notification Form

USE
nber

×	は不好なけれればれれれ	Organizational	Information	作詞作詞作詞作詞作詞作
1.	Name of Organization:	Transwestern Pipeline	e Company - Pucket	t Plant
2.	Mailing Address:	P. O. Box 2521 Hou	uston, Texas	Zip: 77252
3.	Location:	2101 West Dickinson E	Blvd. Fort Stockt	on, Texas 79735
4.	Contact:	Mr. Willard T. Young	mo1.	ephone: (713) 759-5355
5.	Description of Operat	ion: Generat Generat Transpo Dispose	or with no on-site dor with on-site dorter er: Treat Sto	isposal 🕅
×	がれなれなれなれない。	Wastes Info	rmation 💥	企用作用作用作用作用作用作用
6.	Description and Estim	ated Quantities of Was	te Handled:	
	GENERATORS: fil	l in form on reverse f	or each waste str	eam
	TRANSPORTERS: tor	s of oilfield brines a	and drilling mud h	auled annually
	tor	s of wastes from petro	chemical works ha	uled annually
	tor	s of other wastes haul	ed annually	
	DISPOSERS: tor	s disposed annually by	: thermal t	reatment
		chemical treatment	physical	treatment
		biological treatment.	injection	into deep well
		burial	landfarms	
		other		
	44 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -	(4) 4 (4) 4 (4)		
	ではずんずんがんかんか		cation 26262	えずえずえずえずえずえかい
	document, and I herek accurate, and complete	e to the best of my kn or submitting false inf	y of law that this owledge. I am awa	s information is true, are that there are sig-
7.	Signature:	Transwestern Pipelin	e Company	
		e of Company		
	by:			
	Nan	e and Title Willard T. Young		Date Signed
Ĺ		lager, Environmental Pr	otection	0200
	DNR Form #HW-1			LYVIO

CIHIS FORM FOR GENERATORS ONLY

A./ Waste Number	Arsenic contamina			c.	Confidential Yes No ⚠
		ard Class			E Amount
Waste Category	1	Physical State	Degree of C	are	(tons)
III	40	9	: 2		20
A. Waste Number	B. Haza	rdous Waste Name		c.	Confidential
	and the state of t	quilles, cost departe 7, 402 land.	or a section of the first		Yes No
	D. Ha	zard Class			E Amount
Waste Category		Physical State	Degree of C	are	(tons)
					•
<u> </u>		· 			
A. Waste Number	B. Haza	ardous Waste Name		c.	Confidential
A. Waste Number	B. naza	ildous waste name		٠.	Yes No
				<u></u>	The second secon
		zard Class			E Amount
Waste Category	EPA Designation	Physical State	Degree of C	are	(tons)
	·				
A. Waste Number	B. Haza	ardous Waste Name		c.	Confidential
	!				Yes 🗌 No 🗌
	D. Ha	zard Class			E Amount
Waste Category	EPA Designation	Physical State	Degree of C	are	• n
					(33.15)
A. Waste Number	D Van	ardous Waste Name			Confidential
A. waste Number	B. Haz	ardous waste Name		c.	
				<u> </u>	Yes No
		zard Class			E Amount
Waste Category	EPA Designation	Physical State	Degree of	Care	(tons)
	<u> </u>		ł		
A. Waste Number	B. Haz	ardous Waste, Name		c.	Confidential
1	ľ				Yes No
to The Street of	D. Ha	zard Class	The second secon		
Waste Category	EPA Designation	Physical State	Degree of	<u> </u>	E Amount
wassa sassasary	Dan Deday	injuteat state	Degree or	care	(tons)
والمستوالي المستوالية	<u> </u>				
	,				
A. Waste Number	B. Haz	ardous Waste Name		c.	Confidential
<u> </u>	1			1	Yes 🔲 No 🗌
	D. Ha	zard Class	<u> </u>	سيست	E Amount
Waste Category	EPA Designation	Physical State	Degree of	Care	
			Jegree or	Carc	(cons)
	<u> </u>				
A. Waste Number	B. Haz	ardous Waste Name		c.	Confidential
	<u> </u>		No. 2 The Late of	<u> </u>	Yes No
1		zard Class			E Amount
Waste Category	EPA Designation	Physical State	Degree of	Care	(tons)
đ		ł			490198
					10 (17 (19))



FRANK P. SIMONEAUX SECRETARY B. JIM PORTER ASSISTANT SECRETARY

DEPARTMENT OF NATURAL RESOURCES OFFICE OF ENVIRONMENTAL AFFAIRS

GERALD D. HEALY, JR. ADMINISTRATOR

HAZARDOUS WASTE MANAGEMENT DIVISION

AUG 1 7 1982

Dear Applicant:

Re: Generator Notification

We are in receipt of the Hazardous Waste Management Notification Form as submitted to this Department by your firm. On the basis of the information provided, we have determined that your firm's facility is a "generator" as defined by Act 449 of the 1979 Legislature and the Hazardous Waste Management Program Rules and Regulations.

No permit is required of the facility. However, the requirements contained in Section 5.4 et seq. of the rules and regulations are applicable. Also, storage requirements as mentioned in Section 4.2.1 E. 2 b) will be in effect as of the assignment of your number.

We are enclosing a copy of a portion of the notification form you previously submitted denoting this Department's assignment of your hazardous waste identification number and assignment of waste numbers to each of the wastes that you reported. The waste numbers are to be used as a part of the manifest system for those wastes that are transported and disposed of off-site.

Also, please be advised of Section 5.5, Surveillance and Monitoring Procedure, which will be this Department's method of determining if there is a presence of hazardous waste not heretofore identified in your firm's representations.

Should you have any questions, please do not hesitate to contact this office.

Sincehely

TOM PATTERSON

Permit Section

Hazardous Waste Management Division

TP:cg

Enclosure

JUL 1 9 1982

F L O U I Bepartment of Natural Resources
Hazardous Waste Management
NATURAL RESOURCES

Hazardous Waste Notification Form

FOR DEPARTMENT USE Notification Number

**	は、これには、これには、Organizational Information には、これには、これには、これには、これには、これには、これには、これには、これ
1.	Name of Organization: TRANSHESTERN PIPELINE COMPANY - LT-II STATION
2.	Mailing Address: P.C. BOX 2521 HOUSTON, TEXAS Zip: 77252
3.	Location: P.O. BOX 1059 KERMIT, TEXAS 79745
4.	Contact: Telephone:
5.	Description of Operation: Generator with no on-site disposal Generator with on-site disposal
	Transporter
	Disposer: Treat Store Dispose
*	は、これには、 Wastes Information では、 では、 では、 できませる。 Wastes Information できませる。
6.	Description and Estimated Quantities of Waste Handled:
	GENERATORS: fill in form on reverse for each waste stream
	TRANSPORTERS: tons of oilfield brines and drilling mud hauled annually
	tons of wastes from petrochemical works hauled annually
l .	tons of other wastes hauled annually
	DISPOSERS: tons disposed annually by: thermal treatment
	chemical treatment physical treatment
	biological treatment injection into deep well
	burial landfarms
l	other
(S)	SECTION RESERVED Certification RESERVED
	I have personally examined and am familiar with the information submitted in this document, and I hereby certify under penalty of law that this information is true, accurate, and complete to the best of my knowledge. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.
7.	Signature: TRANSMESTERN PIPELINE COMPANY
	Name of Company by: 7/14/82 Name and Title Date Signed WILLARD T. YOUNG, MANAGER, ENVIRONMENTAL PROTECTION

TRANSWESTERN Pipeline Company

A TEXAS EASTERN COMPANY

January 21, 1982

Mr. Jay Snow Texas Department of Water Resources Solid Waste Section P. O. Box 13087, Capitol Station Austin, TX 78711

Dear Mr. Snow:

In accordance with Rule 156.22.01.106(c) of the Texas Industrial Solid Waste Regulations, please find attached a revised Texas Department of Water Resources Industrial Solid Waste Management Inventory form for Transwestern Pipeline Company's Pyote Plant and Station (TDWR Registration Number 32180). The revision involves the change in the classification of the waste amine filters (Waste Number 173470) from hazardous to nonhazardous to concur with the declaration made to your office on October 6, 1981 (a copy of which is attached).

The subject filters are disposed of at Transwestern's Keystone Plant (Registration Number 32258) which is located within the fifty-mile limit definition for on-site disposal. Please note that only this waste is identified on the form.

If there are any questions, please contact Anita Cuevas at 713/759-5318.

Very truly yours,

Manager, Environmental Protection

ANC/jc Attachments

bcc: S. M. Dougherty - w/attachments

Dr. D. H. France

W. G. Marks

G. O. Moe

G. H. Walker - w/attachments

12012363 Hw Chir PA. OSO2D Hw PA. OSO2D Hw TW 255mor

P.O. BOX 2521 HOUSTON, TEXAS 77001 (713) 759-3131

- (/ART	I : GENERAL INF	ORMATIO		
A. Does your firm generate Industrial Solid Waste(s) Yes No	as defined in AMARICANS	TDWR Rules		tacestr
B. Company NameTRANSWESTERN_PIPEL	INE COMPANY - PYOT	TE PLANT AND	STATION	
Plant - P.O. Box P. 0. Box 320	Py	ote	TX	79777
P.O. Box		City	State	Zip
Plant - Street Address From Pyote: S of	<u>n Hwy 1927 for 7 m</u> n E 2 miles to sit	niles.	TX	79777 Zip
Headquarters (if other than above):	n E 2 miles to sit	,eo ,	344	
P. O. Box 2521, 1221 McKinnev	·	louston .	TX	77001
P.O. Box/Street		City	State	Zip
C. Give the location of any disposal site(s) contro	olled by your firm other t	han plant or manu	ifacturing site li	sted in Section B above
1 Puckett Plant	Fort Stocktor	Pecos	TX	79735
Location	City	County	State	Zip 70745
2. Keystone Plant	Kermit	Winkler	TX	79745 Zip
3	City	County	344	2.0
Location	City	County	State	Zip
Willard T. Young Manager, En Title Give numbers of any TDWR permits, orders, etc. Lumbers: WT-II - 32154, Halley Place 2257, Keystone Plant - 32258 - Num Nature of business and/or description of products	held, or applied for, by nt - 32179, Margue ber not received	your firm (specify erite Humphri for Puckett P	es - 32144, lant	Registration Joaquin Statio
compressor station				
				
			•	
			<u></u>	
H. I certify the information herein is complete and a	ocurate to the best of my	knowledge:		
(Villas Thousa	<u> </u>	. ,	1/20/8	2
Willard T. Young Manager, Envir	onmental Protection	on	f pare	
DWR-0060 (Rev. 8-19-80)			 	1201584

	PART II : WASTE INV	ENTORY
WASTE D	ESCRIPTION	DISPOSITION
A. WASTE NO. 3 OF 3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS
C. FORM: (check one)	D. Quantity generated per month: 90 (estimated) □ gallons [Ži pounds □ cubic yards	J. ON-SITE WASTE MANAGEMENT - N/A FACILITY USE: Storage Treatment Recovery Disposal
☐ Gas ☐ Sludge/Slurry % salid	E. Predominately: 🗆 organic 🖾 inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) Sent to Keystone Plant for disposal-
Solubility <u>NA</u> (g/100g H ₂ 0 Flash Point <u>NA</u> °C	NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH NA (mm/yr) Reactive Waste? □ Yes ☑ No amine filters	within 50 miles limit
H. IS THIS A HAZARDOUS WASTE AS D	DEFINED BY THE U.S. EPA? DYES IN NO	
A. WASTE NOOF	B. SIC CODE (if known)	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
C. FORM: (check one) Solid Liquid Gas	D. Quantity generated per month:(estimated)gallons pounds cubic yards	J. ON-SITE WASTE MANAGEMENT — FACILITY USE: Storage Treatment Recovery Disposal
Solubility(g/100g H_2 0 Flash Point°C	E. Predominately:	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity)
H. IS THIS A HAZARDOUS WASTE AS D	EFINED BY THE U.S. EPA?	,
A. WASTE NOOF	B. SIC CODE (if known)	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
C. FORM: (check one) Solid Liquid Gas	D. Quantity generated per month: (estimated) gallons pounds cubic yards	J. ON-SITE WASTE MANAGEMENT — FACILITY USE: Storage Treatment Recovery Disposal
☐ Sludge/Slurry% solid	E. Predominately: 🗆 organic 🗆 inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity)
Solubility(g/100g H ₂ 0 Flash Point°C	(LD ₅₀ , LC ₅₀ , LDL ₀) pH(mm/yr) Reactive Waste?	1201365
H IS THIS A HAZARDOUS WASTE AS D	FFINED BY THE U.S. FPA?	

TEXAS © EASTERN Transmission Corporation

WILLARD T. YOUNG MANAGER ENVIRONMENTAL CONTROL ENGINEERING SERVICES DIVISION

> November 9, 1981 OUR REF: 614-81

Mr. Jay Snow Texas Department of Water Resources Solid Waste Section P. O. Box 13087, Capitol Station Austin, TX 78711

Dear Mr. Snow:

Please find attached an Industrial Solid Waste Management Inventory form for Transwestern Pipeline Company's Keystone Plant. If there are any questions concerning this submittal, please contact Anita Cuevas at 713/759-5318 or Denise Deschenes at 713/759-5376.

Very truly yours,

Willard T. Young Manager, Environmental Protection

ANC/jc Attachments

bcc: S. M. Dougherty - w/attachments

Dr. D. H. France

W. G. Marks

G. O. Moe

G. H. Walker - w/attachments

1201966

a Nov-17-81 4.05020 The



TEXAS DEPARTMENT OF WATER RESOURCES

INDUSTRIAL SOLID WASTE MANAGEMENT INVENTORY

RETURN TO:

TEXAS DEPARTMENT OF WATER RESOURCES SOLID WASTE SECTION

P.O. BOX 13087, CAPITOL STATION

AUSTIN, TEXAS 78711

INSTRUCTIONS

PLEASE RETURN WITHIN 30 DAYS

PART I: PART I is to be completed by everyone and begins on Page 2. An explanation for each item follows:

- A. If your firm generates industrial solid waste as defined by ARMINIAN TOWR rules, check the box marked "yes" and complete both PART I and PART II of the Inventory. If your firm generates no waste, check "no" and complete only PART I.
- B. Give the name, the Texas mailing address (P.O. Box, City, State, Zip Code) and the physical location address (Street, City, State, Zip Code) of your company. Also give the mailing address of your firm's administrative or operational headquarters, if different.
- C. Give the address, city, county and zip code of any waste disposal site owned and/or controlled by your company which is not the same as, but is within 50 miles of your plant.
- D. Give the total number of persons employed at your plant.
- E. Give the name, title, area code and telephone number of the person TDWR should contact in regard to your company's solid waste disposal activities.
- F. Give the numbers of any permits previously issued to your company by TDWR or by the former TWQB (Industrial Wastewater Discharge or No Discharge Permits; Injection Well Permits, etc.)
- G. Describe the goods produced or services provided by your company at the plant site.
- H. Sign and date the Inventory certifying that the information you have supplied is both accurate and complete.

PART II: PART II begins on page 3 and continues through page 4. If your company is an industrial solid waste generator, you should complete items A-K for each waste you produce. Space is provided for listing six (6) wastes, If you should need more space, you may duplicate the blank form and/or attach any additional information as needed. An explanation for each item follows:

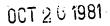
- A. In the first blank, give the sequence number of the waste; in the second blank, give the total number of wastes to be listed. For example: if you generate 2 wastes, the first waste listed will be waste no. 1 of 2; the second waste listed will be waste no. 2 of 2, etc.
- B. If it is available to you, give the S.I.C. Code for each manufacturing process as given by the Standard Industrial Classification Manual.
- C. Check the box indicating the form of the waste. If the waste is a sludge (part liquid, part solid), give the percentage of solids contained in the sludge.
- D. Give an estimate of the average amount of each waste produced each month and check one box to indicate the unit of measurement employed.
- E. Check one box to indicate whether the waste is primarily organic or inorganic.
- F. Enter data requested indicating characteristics of waste material and indicate type of unit or measurement used, if applicable, indicate if waste is reactive by checking YES or NO.
- G. Give a description of the waste material, detailing all major components.
- H. Indicate if the waste is "hazardous", as defined by the U.S. Environmental Protection Agency, by checking YES or NO.

- I. Indicate the number of times per month the waste is shipped off-site.
- J. If the waste is stored, treated or disposed on-site, or if the waste is recovered for use or sale, check the on-site box and any other boxes indicating whether it is stored, treated, recovered or disposed. Note: "On-site" means within the property boundaries of a tract of land owned or effectively controlled by the waste generator or within 50 miles of the facility where the waste is produced. A disposal operation shall not be considered "on-site" if the waste is collected, handled, stored or disposed with wastes from generating points under different ownership.
- K. Describe (in detail) every facility involved in the on-site management of the waste named in letter G, above, giving facility types, sizes and capacities.

Ci Yes 🗆 No	colid Waste(s) as defined in	TDWR Rules		
Company Name TRANSWESTERN	PIPFLINF COMPANY - Keysto	one Plant		
Plant - P.O. Box P. O. Box 10	59	Kermit	TX	79745
P.O. Sex	nit: N 3,5 miles on Hwy	City I R	State TV	Zıp 79745
Address Headquarters (if other than above):	E for 4.5 miles on) 874, N 1.2 miles on	FM City	State	Z:p
P. O. Box 2521, 1221 Mc	then W into site	Houston	TX	77001
P.O. Box/Street	Killiney	City	State	Zip
Give the location of any disposal	site(s) controlled by your firm other	er than plant or mar	nufacturing site list	ed in Section B abo
1 Puckett Plant	Fort Stockton	n Pecos	TX	79735
Location	City	County	State	Zip
Z	City	County	State	Zip
Location	City	County	State	Zıp
At a second section				
TDWR Registration Number	32144 for Marguerite Hur	mpheries Gas I		nt. Hemphill C
TDWR Registration Number TX. Application submitt		npheries Gas I received yet.	reatment Plan	nt. Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	at. Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	nt. Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	nt, Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	at. Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	nt, Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	at. Hemphill C
TDWR Registration Number TX. Application submitt	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet.	reatment Plan	at. Hemphill C
TX. Application submitt Nature of business and/or description	32144 for Marguerite Hur ed for C.1 no number	npheries Gas I received yet. ral gas treatm	reatment Plan	at, Hemphill C
TDWR Registration Number TX. Application submitt Nature of business and/or description	32144 for Marguerite Hursed for C.1 no number of products manufactured: Natur	npheries Gas I received yet. ral gas treatm	reatment Plan	120136

TDWR-0060 (Rev. 8-19-80) Page 2 of 4

PART II : WASTE INVENTORY			
WASTE D	ESCRIPTION	DISPOSITION	
A. WASTE NO. 1 OF 3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH: None	
C. FORM: (check one) C Solid Liquid Gas	D. Quantity generated per month: 7000 (estimated) gallons D pounds Cubic yards	□ ON-SITE WASTE MANAGEMENT — FACILITY USE: □ Storage □ Treatment □ Recovery □ Disposal Company □ Disposal Company □ Disposal Company □ Disposal	
Sludge/Slurry % solid E. Predominately: organic inorganic F. CHARACTERISTICS: Toxicity NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH NA Solubility NA (g/100g H ₂ 0) Corrosion NA (mm/yr) Flash Point NA °C Reactive Waste? Yes No G. DESCRIPTION (major components): paper and wood scraps oil filters, and amine filters		K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) Proposed incinerator - Consumat Model C-125 Wastes presently disposed of in a landfill with 350 cubic yard capacit Ash generated by the incinerator will be disposed of in the existing	
H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? YES X NO		landfill.	
A. WASTE NO. 2 OF 3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS KERKMORKNX biannually	
C. FORM: (check one) Solid D. Liquid Gas	D. Quantity generated per month: 1800 (estimated) I gellons pounds cubic yards	J. 🖄 ON-SITE WASTE MANAGEMENT — FACILITY USE: 🖄 Storage 🔲 Treatment Recovery 🗀 Disposal	
F. CHARACTERISTICS: Toxicity NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH 6.8 Solubility NA (g/100g H ₂ 0) Corrosion NA (mm/yr) Flash Point 100 °C Reactive Waste? Yes No 6. DESCRIPTION (major components): engine room wash water H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? YES NO		K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) West concrete lined pond 77'vi x 220'l x 4'd	
A. WASTE NO3 OF3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS REFENDATION DIANNUALLY	
C. FORM: (check one) Solid Sliquid Gas Sludge/Sturry% solid	D. Quantity generated per month: 1800 (estimated) 1 gallons pounds cubic yards E. Predominstely: organic inorganic	J. MO ON-SITE WASTE MANAGEMENT — FACILITY USE: MO Storage	
Solubility NA (g/100g H ₂ 0) Flash Point 100 °C 6. DESCRIPTION (major components):	Reactive Waste?	East concrete lined pond 143'w x 220'l x 4'd 1201369	
IS THIS A HAZARDOUS WASTE AS D	EFINED BY THE U.S. EPA? 🔲 YES 🖾 NO		





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY COLLAGAN

REGION IX

215 Fremont Street San Francisco, Ca. 94105

2 2 001 1981

F.L. Cohagen Vice President-Operations P.O. Box 2521 Houston, TX 77001 TSC 15-(18)26

Dear Mr. Cohagen:

A PCB investigation was made at Winslow Compressor Station #3 on April 3, 1981. During the course of this investigation, information was gathered by EPA in accordance with Section 11 of the Toxic Substances Control Act. A copy of the investigation report is enclosed for your information.

The deficiencies or violations that may be noted in the report are not necessarily inclusive and any omission of other deficiencies or violations shall not be binding upon the Agency.

Comments may be provided by you concerning any aspect of the report. In your response please refer to report number TSC 15-(18)26.

EPA routinely provides copies of investigation reports to State agencies. Such releases will be handled according to the rules governing business confidentiality claims contained in the Code of Federal Regulations (40 CFR, Part 2).

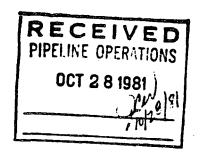
If you have questions concerning this report, please contact Robert Mandel, Chief, Hazardous Materials Section at (415) 556-8752.

Sincerely yours,

R. Michael Stenburg, Chief Air and Hazardous Materials Branch Surveillance and Analysis Division

Enclosures

cc: Larry Langston



RECEIVED NOV 13 1301 T. A. HERON

UNITED STATES ENVIRONMENTAL PROTEC. ION AGENCY

TSC 15-(18)26

DATE: 1 2 307 1981

SUBJECT: TSCA/PCB Facility Investigation: Transwestern Pipeline Company, Winslow Compressor Station #3

FROM: Steve Simanonok, Environmental Protection Specialist Sandy Avol, Environmental Protection Specialist

TO: Bob Mandel, Chief
Hazardous Materials Section

On April 3, 1981, we arrived at the subject facility. We presented our credentials and issued a Notice of Inspection and TSCA Confidentiality Notice to Lowell Stump, District Supervisor. Also present was Wayne Gallatin, District Superintendent. We discussed the contamination of natural gas lines and EPA's role in the sampling of compressor stations.

Mr. Stump mentioned that several years ago Transwestern used a synthetic oil manufactured by Monsanto. He stated that Monsanto claimed the synthetic oil was a good lubricant and wouldn't burn. He added that this oil has since been removed from the compressors.

We discussed our plan to sample lubricant from the compressors and the scrubber collection tank. Mr. Stump said that he had been told we were only going to sample compressor oil. At 10:40 a.m. he telephoned Larry Langston, Division Manager, in Roswell, New Mexico and asked Steve Simanonok to speak with him.

Mr. Langston stated that he understood EPA would only be sampling compressor oil. Steve said that EPA was routinely sampling scrubbers to determine the content of upstream compressor oil. Mr. Langston suggested that we call Mr. John Seitz in EPA Headquarters to coordinate our activities. Steve replied that we worked for the EPA Regional Office in San Francisco and understood that the TSCA gave us the authority to sample. Steve asked him whether he would allow us to take samples from the scrubber. At 10:57 a.m. Mr. Langston refused to allow us to take scrubber samples. However, he told Steve to wait in the office for a return call from Cliff Jacey Williams, Pipeline Superintendent for Transwestern and Texas Eastern. A few minutes later, Mr. Williams called and stated that we would be allowed to take scrubber samples.

RECFIVED

T. A. HERON

When questioned about the disposal of scrubber oil Mr. Stump stated that it was collected in a tank and transported to a tank facility in Flagstaff, located at the District 1 office at Station #2 (near Navajo Ordinance-Belmont Station). Approximately 1100-1200 gallons of this oil is accumulated at Winslow #3 every 4 months. He thought the oil was sold to Kaibab Industries and was used for boosting diesel fuel.

Upon completion of the office interview, Lowell Stump escorted the investigators through the compressor station. Samples #TX-4-SLA and #TX-5-SLA were obtained from the compressor/ seal oil of units 303 and 301, respectively. Mr. Stump purged the line of approximately one gallon of oil prior to sampling.

The investigators then proceeded to the east side of the property. Sample #TX-6-SLA was obtained from a waste oil pit. Mr. Stump explained that this pit contained material entering drains from the engine (compressor) room.

Sample #TX-7-SLA was obtained from the scrubber collection tank and should represent the content of upstream compressor oil.

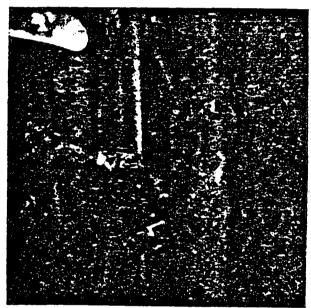
All samples remained in the inspectors custody until reaching a workshop. At that time, each sample was split with the company and custody seals were affixed. A receipt for samples was issued.



ANT # 381 Strong compress.



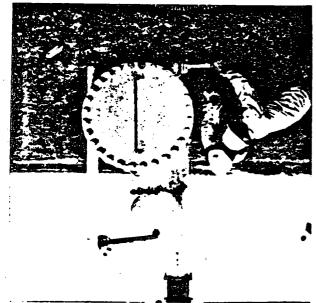
1/3/8/ SLA Taking
NAL Somple # SLA



4/3/8/ SCATHRING-SAMPLE # STILL TY-4= SLA

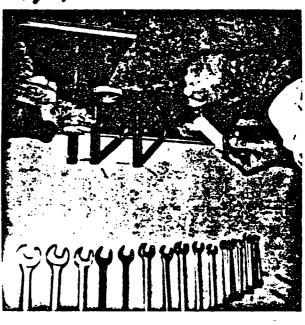
1201021

3/3/8/52.A. A. A. A. Mom 4/3/8/5000 coll youk

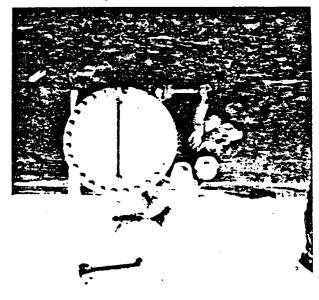


4/3/81 howell stump taking

4/3/81/4 somple of



SHS Sample town

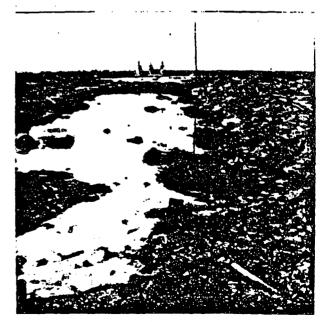




TSLA TAKING SAMPLE



3/3/5/ Sample find



\$HS weste oil pit on 4/3/81 winslow#3 Sta.
1201975

United States Environmental Protection Agency	Transliesten Pfeline Co.
TSCA INSPECTION CONFIDENTIALITY NOTICE	P.O. Bix 370
Inspector Hame	Flagstaff, AZ Slocus
Inspector Address IPA Region II	CHIEF PRESERVE OFFICER OF 1722
215 Framont Street	Title
San Francisco, CA 941C5	Address
FICAL INVESTIGATOR	
Name of Individual to whom Motice Given LEWEIL Stump	Title /
It is possible that IPA will receive public requests	1. The information is not publicly available else-
for release of the information obtained during in- spection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552, EPA requiations issued thereunder, 40 CFR Part 1: and the Toxic Substances Control Act, Section 14. EPA is	vace. 4. Disclosure of the information would cause substantial harm to your company's competitive position. At the completion of the inspection, you will be
required to make inspection data available in re- sponse to POTA requests unless the Administrator of the Agency determines that the data contains informa- tion entitled to confidential treatment.	quem a receipt for all documents, samples, and other meterials collected. At that time, you may make claims that some or all of the information is con- fidential and mosts the four critaria listed above.
Any or all the information collected by SPA during the inspection may be claimed confidential if it relates to trade secrets or consercial or financial matters that you consider to be confidential. If you make claims of confidentiality, SPA will disclose the information only to the extent, and by means of the procedures, set forth in the regulations (cited above) governing SPA's treatment of confidential information. Among other things, the regulations require that SPA	If you are not authorized by your company to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples, and other materials to the Chief Executive Officer of your firm within two days of this date. The Chief Executive Officer must return a statement specifying any information which should receive confidential treatment.
notify you in advance of publicity discissing any in- formation you have claused and certified confidential.	the statement from the Glief Emeritary Officer should be addressed to: Kirry 12rc1556, 15th 10cmmen
To Claim Confidential Information	Control Officer, US EFA Region III Hezardous Materials Section (432)
To claim information confidential, you must cortify that each claimed item meets all of the following criteria:	215 Fremont Street
1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.	San Francisco, CA 94105 and mailed by requested return-receipt-requested mail within seven (7) calendar days of receipt of this Motice.
2. The information is not, and has not been, reason- ably obtainable without your commany's consent: by other persons (other than questmental bodies) by use of legitimate means (other than discovery based on a showing of special need in a judicial or quasi-judicial proceeding).	failure by your firm to submit a written request that information be treated as confidential, either at the completion of the inspection or by the Chief Emerative Officer within the seven-day period, will be treated by EPA as a valver by your company of any claims for confidentiality regarding the inspection data.
To be completed by facility official receiving this notice	If there is no one on the premises of the facility who is authorized to make business confidentiality claims for the firm, a copy of this Notice and other inspection materials will be sent to the company's chief executive officer. If
I have received and read this Notice.	there is another company official who should also receive this information, please designate below.
Ell STUMP	Lovic Langs Toxi
DIST T SUDL'	Dic' I May
Signature 1/41112	POBCX 2018
Date 4-3-81	HOSWELL, NEW MEXICO GENT

United States Environmental Protection Agency	Transurstan Pipeline
NOTICE OF INSPECTION	Transmestern Pipeline
Inspector Name and Address	FIGURETALE AZ SUCCI
IFA Region II, 215 Fremont Street San Francisco, CA 94105	Date 4/3/3/1 2.12.
Inspector's Signature	Name and Title of Resiptant
-incies to	Lowell Stump, district syene
Title on the second of the sec	Signature of Recipient
FOM Invistrator	Janui Shing
REASON FOR INSPECTION	en and the second of the second and the second of the seco
Under the authority of Section 11 of	the Toxic Substances Control Act
For the purpose of inspecting (inclu	ding taking samples, photographs, Livities) an establishment, facility,
or other premises in which chemical	substances or mixtures or articles
containing same are manufactured, proor after their distribution in comme	
papers, processes, controls, and fac	cilities) and any conveyance being
	es, mixtures, or articles containing ibution in commerce (including records,
	and facilities) bearing on whether the
requirements of the Act applicable to or articles within or associated within	to the chemical substances, mixtures,
been compiled with.	n and brammaes or convenience uses
the contract of the contract o	
In addition, this inspection extends	to (circle approvaiate letters):
(A) Financial data (B) Sales data	(D) Personnel data (E) Reserach data
. (C) Pricing data	
	·
The nature and extent of inspection	
E above as follows:	of such data specified in A through
	of such data specified in A through
	of such data specified in A through
	of such data specified in A through
E above as follows:	
E above as follows:	

SEPA S	ited States vironmental Protection	cion	TIMISIUTS TEN PIPELINE Co
RECEIPT FOR	_		Pien Address Winslew #3
SAMPLES AND	DOCUMENTS		Po. Bax 376
SKND4 /	tice		Flagstoff AZobeci
ERA Region III 215 Fremont Str			Lowell Strup
San Francisco,			DIST SUCI
Date Collected Dupl	Yes	unsted and Received-	TX-4-SCA, TX-5-SCA, TX-6-3 LA, TX-7-5C
			nces and/or mixtures described selow were ion and enforcement of the Toxic Substances
Receipt for the do	cument(s) and	d/or sample(s)	described is hereby acknowedged:
TX-41-56A	e e e e e e e e e e e e e e e e e e e	20mars	sor y seal oil from
() 50 / .		Unit =	· · · · · · · · · · · · · · · · · · ·
TX-5-56A			set 4 seal oil from
		Lnit #	3c1
TX-6-56A	·	06 5	oil from pit on east side tation (adjacent to proferty
		like)	
TX-7-56A			tion tank
•	_		
Signature of Inspector	Azec	-	Signature of Owner. Sporstor, or Agent Sicilal Harry Table
FIELD I	L'estrepet		Dist I Super

AUG 2 4 1981 F. L. COHAGAN



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IX

215 Fremont Street San Francisco, Ca. 94105

AUG 20 1981

IN REPLY E-3-2
REFER TO: PCB Gas Pipeline

F.L. Cohagan Vice President - Operations Texas Eastern Transmission Corp. P.O. Box 2521 Houston, TX 77001

Dear Mr. Cohagan:

The laboratory report for PCB analysis of samples collected from Transwestern Pipeline Company's Winslow Compressor Station #3 is enclosed for your review. All samples analyzed were positive for PCB. One sample is still awaiting analysis.

Because the analytical results are given by sample number, we have also enclosed a list of sample numbers and corresponding collection sites.

We will forward the test results for the remaining sample when analysis has been completed. Please contact Jerelean Johnson of my staff at (415)556-6150 if you have any questions or need additional information.

Sincerely,

Carl C. Kohnert, Jr. Acting Director Enforcement Division

Enclosure

8-24-81 FLC Distr. - Mr. J. C. Williams

8/31/81

JCW:Distribution - D. A. Tefankjian: The analical methodology and quality control data contained herein may be of interest to you.

RECEIVED
PIPELINE OPERATIONS
AUG 2 5 1981

Transwestern Pipeline Company Collection Sites

Sample Number	Collection Date	Site
TX-4-SLA	4-3-81	Winslow Compressor Station #3 - Compressor and seal oil from Unit #303.
TX-5-SLA	4-3-81	Winslow Compressor Station #3 - Compressor and seal oil from Unit #301.
TX-6-SLA	4-3-81	Winslow Compressor Station #3 - Waste oil from pit on east side of station. Adjacent to property line.
TX-7-SLA	4-3-81	Winslow Compressor Station #3 - Waste oil from scrubber collection tank.

Versar...

EPA COMPLIANCE MONITORING PROGRAM

Submitted to:

US EPA, Region IX 100 California Street San Francisco, CA 94111

> EPA No. 63-01-6291 Versar No. 717.19

Submitted by:

VERSAR INC. 6621 Electronic Drive Springfield, VA 22151

Mc1.231.

INTRODUCTION

A total of 25 samples were collected by EPA Region IX personnel and sent to Versar for PCB analysis. The samples arrived in three different batches during the period between March 12 and April 16, 1981. All analytical work performed was in accordance with the written work plan for task OV2-81-01-10.

Included in the 25 samples were five samples whose matrices were outside the specifications in the work plan. Three samples (TX-5-Kl0, TX-3-SHS, and TX-9-SHS) were solids. One sample (TX-6-SIA) was a waste oil and Sample TX-3-SIA was water. It is mainly for this reason that they were set aside and not analyzed.

The methodology for the analysis is outlined below. The Standard Versar Quality Control Program (SVQCP) was followed and the results presented in the QC summary section. A description of the SVQCP is also included. All field and laboratory chain-of-custody forms are included in Appendix I.

RESULTS

The results of the analysis of the 20 oils are tabulated in Table 1. Four samples were found to contain PCBs, two were contaminated with greater than 50 ppm with one of them over the 500 ppm limit. The other two were well below the 50 ppm limit.

METHODOLOGY

Oil, condensate: Weighed 2.0 grams of sample into a tared 10 ml volumetric flask and diluted to mark with iso-octane. Transferred the sample to 50 ml centrifuge tubes. 10 ml concentrated sulfuric acid was added and the mixture was vortexed. The phases were allowed to separate and the top organic phase was transferred to a 15 ml centrifuge tube.

Several drops of elemental mercury (Hg) was added to the extract, and the Hg-extract combination was put on an automatic wrist shaker for 10 min. If a black precipitate appeared, the extract was transferred to another centrifuge tube and the process was repeated. This was continued until the addition of Hg to the extract did not cause a precipitate. At this point, the free iso-octane was vialed for injection (2 μ l) into a gas chromatograph equipped with an electron capture detector.

Versar.

After the initial screen of the samples, if interferences were still observed, a gel permeation cleanup step was initiated. This cleanup consisted of preparing a chromatography column with 15 gm of activated silica gel (130°C overnight), topped off with 1 cm anhydrous sodium sulfate. The column was pre-eluted with 50 ml hexane.

Five ml of the 1:5 sample dilution was pipeted on top of the column. Prior to the exposure of the surface of the column to air, 125 ml of hexane was added. The first 25 ml were discarded, and the remainder was collected in a Kuderna-Danish apparatus and concentrated to 10 ml. Here, 1 ml of the extract was vialed for injection (2 µl) into a gas chromatograph equipped with an electron capture detector.

QUALITY CONTROL SUMMARY

The full Standard Versar Quality Control Program (SVQCP) was run with the samples. No precision data is available because of lack of PCBs in sample duplicates. Spike recovery data was obtained and showed the method to be very effective in recovering PCBs from samples. The quality control data is presented in Table 2 and summarized on the quality control summary sheet.

¹Memorandum from NEIC, Denver, Colorado, to the Interstate Natural Gas Association of America, February 20, 1981.

FOR AMALYTICAL REPORT

PREPARED FOR:

Re- # 717.19

TABLE 1 (Con't)

LAE NO.	CONCENTRATION PARTS/MILLION	ARCOLOR	Comments
		·	'
•			·
			,
	•		
1692	3	1242	
- 1693	6	1242	
1694	Not Analyzed	·	
1695	1100	124 2	
t = 1 ppm			
	1692 - 1693 1694 1695	1692 3 - 1693 6 1694 Not Analyzed 1695 1100	1692 3 1242 - 1693 6 1242 1694 Not Analyzed 1695 1100 1242

A.E. 4.5 1701

MARK T. CARRETT, CHAIST APPLIED CHISTRY DIVISIONO 198

SEET ELECTRONIC DRIVE, SPRINGFIELD, VIRGINIA 20:51

TELEPHONE: .7221 TEC-1000

Mci.zui.

TABLE :

QUALITY CONTROL DATA

Matri	<u>×</u>	Amount Found (µg/g)	Amount Found (ug/g)
Oil:	Reagent Blank	<1	NA*
	Method Standard	53	50
	1399X (sample)	<1	NA.
seal a code	1399Y (duplicate)	<1	NA
	1399Z (spiked sample)	42	50

*Not applicable

QUALITY CONTROL SUMMARY

Date: May 18, 1981	Matrix: Oil,	condensate
Spike: 1 ml Aroclor 1242 50		-
·	•	
Precision	Duplicate Sample	NA*
Recovery	Spiked Sample	84%
Accuracy	Method Standard	106%

*Not available

MCI'S Mine

STANDARD VERSAR QUALITY CONTROL PROGRAM

The Standard Versar Quality Control Program is included with each batch of samples. A batch is a suitable number of samples to be analyzed at one time. The program consists of four QC audits which are treated with the same conditions as the samples. The QC audits represent from 20-400% of the total number analyzed, depending on the number of samples per batch. The audits are:

- (1) Duplicate
- (2) Spiked Matrix
- (3) Method Standard
- (4) Method Blank

A sample is chosen randomly from the batch and split three ways, labelled x, y and z. The x and y aliquots are analyzed as duplicates (QC Audit 1). The z aliquot and a blank sample (QC audits 2 and 3) are spiked with the parameter of interest at the concentration of interest. The fourth QC audit is simply a blank treated as a sample.

Versar calculates its laboratory precision and recovery as follows:

<u>Precision</u> - calculated from the duplicate sample and presented as the relative percent difference

$$\frac{a-b}{a+b/2} \times 100$$

<u>Fecovery</u> - calculated from the spiked sample and the method standard and presented as the percent recovered

Where: a - first value from sample "x"

b - second value from sample "y"

c - amount calculated

d - amount spiked

Method blanks are calculated from the values obtained from instrument background and method interferences detected during analysis. A value reported does not mean the parameter of interest was detected but it does reflect the lower limits of determion.

TEXAS ()
EASTERN
Gas Pipeline Company

A DIVISION OF TEXAS EASTERN TRANSMISSION CORPORATION

bcc: B. ^ Andrews w/attachments

G. Wing

A. B. Jarnagin

J. C. Williams

BCA DISTRIBUTION 11/16/81:

Norman D. Radford, Jr., Esq.

Ath

F. L. COHAGAN

August 20, 1981

Mr. John Seitz, Chief Compliance Monitoring Branch Pesticides and Toxic Substances Enforcement Division Environmental Protection Agency 401 "M" Street S.W. Washington, D.C. 20460

Dear Mr. Seitz:

In response to Mr. A. E. Conroy's letter of May 27, 1981, and as a follow-up to our letter of June 22, 1981, the following information is provided on that portion of Texas Eastern Gas Pipeline Company and Transwestern Pipeline Company systems in which PCB concentrations of 50 PPM or more have been found.

Step 1, as set forth in the May 27, 1981 letter, requests a plan for handling all PCB liquids removed from the systems, including the items listed at the top of page 2, as follows:

1. A description of the locations from which the liquids were being removed.

Liquids are periodically being drained and collected from:

a. Gas scrubbers or strainers located on the suction side of compressor stations and at other strategic locations on the pipeline systems.

b. Liquid drains, drips or knock-out devices at gas measuring stations on the pipeline systems.

c. Scraper receiving traps (liquids received in the trap with scrapers).

d. Drainage from valve bodies, orifice fittings, meters, piping headers, and other drain points on the systems.

2. An estimate of the amounts of condensate being removed.

The amounts of liquids being removed will vary from year to year and during the seasons of the year. Based on available records it is estimated that the following quantities of liquids are removed from the PCB contaminated portions of the systems.

Texas Eastern: Approximately 125,000 to 150,000

Gallons per year

Transwestern: Approximately 40,000 to 50,000

Gallons per year

3. A description of the measures being taken to protect workers handling any items coming in contact with PCB.

Measures being taken to protect workers handling any items coming in contact with PCB's are as shown on Attachment No. 1. This information was contained in Attachment No. 4 of our June 12, 1981 reponse to Mr. A. E. Conroy's letter of May 15, 1981.

4. Procedures you will follow for handling, marking, storing and disposing of the PCB's in accordance with TSCA and the applicable Department of Transportation regulations.

PCB contaminated materials are collected in tanks or drums and held for disposal at EPA approved incinerators or land-fills, or by other methods of disposal approved by EPA. Methods of disposal for PCB contaminated liquids is based on PCB concentration determined by testing. Procedures being followed for handling, marking, storing, and disposing of PCB's are as shown on Attachment No. 2. This information was contained in Attachment No. 4 of our June 12, 1981 response to Mr. A. E. Conroy's letter of May 15, 1981.

In order that full consideration may be given to all facets of the problem in considering alternatives for preventing movement of PCB's into other systems (your Step 2), information requested on identification of PCB sources (top of page 3) is as follows:

A complete identification of all sources of the PCB's in your system.

The only source of PCB's on the Texas Eastern and Transwestern systems definitively established to date is the PCB lubricant installed in certain gas turbine units between 1958 and 1970.

- 2. A plan for eliminating the source. This plan should include:
 - A suggested timetable

Measures to assure the safety of workers
Procedures you will follow for handling, storing,
and disposing of the PCB's in accordance with the
law.

As more fully explained in our June 12, 1981 reponse to Mr. A. E. Conroy's letter of May 15, 1981, all gas turbine units which contained the PCB lubricant were drained and non-PCB lubricant installed between 1972 and 1977. PCB concentrations in all units were reduced to less than 50 PPM of PCB in 1978 (with the exception of one unit in

January, 1979), well in advance of the May 1, 1980 regulatory deadline for achieving this level. However, because of an apparent tendency for the PCB concentration to increase with time, additional oil changes have subsequently been required in most units (some as many as five (5) times) in an effort to maintain the PCB concentrations at less than 50 PPM. Contaminated PCB oils removed from the units have been disposed of at EPA approved landfill or incinerator facilities in compliance with EPA regulations. Until EPA approval of incinerator facilities in March, 1981, storage of PCB contaminated oil in accordance with EPA requirements was necessary. Such stored PCB contaminated oil has since been disposed of at EPA approved incinerators. Measures taken to assure safety of workers are given in Attachment No. 1. Procedures followed for handling, storing, and disposing of PCB's are contained in Attachment No. 2.

3. A monitoring plan to assure that the source of PCB's has been eliminated.

Sampling to determine residual PCB concentrations in the units will be conducted at approximate six (6) months intervals until sampling adequately substantiates the feasibility of a less frequent time interval or elimination of PCB contamination.

Information requested in reporting on the technical alternatives for preventing further movement of PCB's into other transmission or distribution systems (Step 2 - middle of page 2 of Mr. Conroy's letter) is as follows:

1. A description of all possible alternatives for preventing movement of PCB's into other systems.

Texas Eastern is actively researching all available methods and technology possibly applicable to eliminating or mitigating PCB contamination of pipeline systems. Laboratory and field testing is being performed on any methods that appear viable. It is hoped that some viable method of chemical treatment will evolve from this research. However, to date the only feasible means for preventing movement of PCB's into other systems appears to be control and/or elimination of the pipeline liquids which act as the medium in which the PCB's are transported. For this reason, it is felt that the feasible alternatives available at this time for the Texas Eastern system are as follows:

- A. Installation of a high efficiency filter/separator at each point where gas leaves the Texas Eastern system.
- B. Installation of a high efficiency filter/separator at all points where gas leaves the Texas Eastern system, and there is a history of condensate liquid removal.

- C. Installation of high efficiency filter/separators at strategically selected central points on the Texas Eastern system located downstream of original source points of PCB's.
- D. Installation of dehydration equipment to minimize further spread of PCB's throughout the system by reducing the quantity of liquids entering the system which are providing a medium for transporting and distributing PCB's.
- E. Removal of PCB's by systematic pipeline scraper runs utilizing a flushing medium.

Since Transwestern normally only delivers gas to one customer downstream of the original contaminating source, installation of a high efficiency filter/separator on the main line at the delivery point will serve the combined purposes of all alternatives except E.

2. The best available estimates of the cost, effectiveness and time needed for each alternative.

Estimates of Cost

	<u>Texas Eastern</u>	<u>Transwestern</u>
Alternative A	\$12,050,000	
Alternative B	7,750,000	
Alternative C	3,761,000	\$ 567,000
Alternative D	/ 8, 500,000	
Alternative E	Indeterminate	Indeterminate

Estimates of Effectiveness

It is felt that all methods would be effective in time. Alternative A would be most effective in preventing movement to other systems, but will take the longest period of time to implement and the longest period of time of the filter/ separator alternatives to achieve ultimate elimination of the problem in the Texas Eastern system. Alternative C, on the other hand, can be implemented most expeditiously and is the most effective method of achieving the ultimate overall objective of eliminating contamination in the Texas Eastern system in the shortest period of time, thereby reducing the continued period of exposure and costs in handling, transporting, and disposing of contaminated liquids. Alternative B is a compromise which is neither the most effective nor the most expeditious. By providing dryer gas and reducing the quantity of liquids entering the system which provide a medium for transporting and distributing PCB's, Alternative D will serve to "dry-up" and minimize liquid flow in the system, thereby preventing movement of PCB's to other systems. Ultimate elimination of residual contamination on the Texas Eastern system would have to be accomplished by pigging and

drainage and would probably take the longest period of time to accomplish utilizing this method by itself. However, by reducing the quantity of contaminated liquids, the expense, exposure, and other problems associated with disposal of contaminated liquids would be greatly reduced. Alternative E by itself is neither an effective nor expeditious method and is not always possible in all pipeline segments. Alternative E would be most effective in conjunction with, or as a supplement to, one of the other methods.

Estimated Time Needed

	Install and/or Implement	To Become Effective
Alternative A	20 Months Minimum	Upon in-service date at each location
Alternative B	16 Months Minimum	Upon in-service date at locations where installed
Alternative C	12 Months Minimum	Upon in-service date
Alternative D	15 Months Minimum	Upon in-service date
Alternative E	Already Imple- mented on ex- perimenal basis	Indeterminate

3. Your assessment of the feasibility of each method.

Alternative A, B, and C are all considered feasible in themselves. Alternative D is basically more feasible as a preventative method than a clean-up method. Alternative E is not considered feasible by itself but pigging is considered a necessary component or supplement to each of the other methods. However, utilization of a flushing medium may or may not be beneficial, or even possible. When used in conjunction with filter/separators and/or dehydration, pigging alone without a flushing medium would probably prove more beneficial than with a flushing medium.

As previously mentioned, Alternative A would be most effective in preventing movement to other systems, but would take 1201391 the longest period of time in which to implement due to delay in material procurement and the large number of installations to be made. Therefore, not only would movement of contaminated liquids continue for a longer period of time, but at a time when concentrations are at their highest (diminishing in time

with liquid removal and drainage of residual concentrations). Except for Alternative B. Alternative A would take the longest period of time to cleanup the Texas Eastern system, thus delaying achievement of the ultimate overall objective of eliminating the contamination source and thereby eliminating the exposure and costs in handling, transporting, and disposing of contaminated liquids as early as possible. Not only would the initial cost of separate filter/separators be more, but future operating and maintenance costs would be commensurately higher due to the larger number of installations, the additional number of appurtenant storage facilities required, larger number of personnel involved, disposal problems associated with larger number and broad geographic dispersal of filter elements, and other related. aspects involved. Alternative A would involve approximately 189 separate filter/separators with 21 or more locations requiring additional storage facilities.

Alternative B represents basically a selective application of Alternative A with filter/separator installations only at points where there is a history of condensate liquids removal where gas leaves the system. While this method would represent a definite savings in installation costs and would achieve a better cost per benefit ratio, the operating and maintenance costs would not be reduced commensurately, because the approximate_110 locations involved would still be widely dispersed geographically and 21 or more locations would still require additional storage facilities. Additionally, because the behavior of pipeline liquids is sometimes erratic, there is no assurance that contaminated liquids would not occur at a location without a filter/separator. Based on the same rationale as applied to Alternative A, Alternative B would be even slower and less effective than Alternative A in reducing and eliminating contamination in the Texas Eastern system and thereby ultimately solving the overall problem. While a feasible alternative, Alternative B is felt to be only a partial solution.

Alternative C can be implemented in the shortest period of time. Thus it is the most expeditious method to mitigate the movement of contaminated liquids to other systems. Also it is the most effective method to achieve the ultimate overall objective of eliminating contamination in the Texas Eastern system in the shortest period of time. This would thereby reduce the continued period of exposure and costs in handling, transporting, and disposing of contaminated liquids. By strategically locating filter/separators on the main line downstream of original PCB sources (gas turbines that formerly used PCB lubricant), Alternative C has a distinct advantage in that liquids will be removed from the full thru-put of the main line at the points on the system where PCB concentrations are most likely to be the highest (downstream of the subject turbines). This will not only provide most effective removal of the maximum quantity of liquids, thereby eliminating the medium for transporting and spreading PCB contami-

nation, but it will also remove the liquids most likely to have the highest PCB concentrations. Since gas input points downstream of the filter/separator locations are minimal and are the only input points where additional liquids may enter the system, movement of PCB's to other systems is minimized due to the lack of liquids. Since there would be fewer locations involved, with fewer liquid storage facilities, the operating and maintenance costs would be less than that for Alternatives A or B. Utilization of Alternative C would also reduce the quantity of liquids being transported, both in the pipeline and for disposal. Another advantage of Alternative C would be the added effectiveness of scraper runs in conjunction with filter/separator installations because. of more effective liquid removal due to full flow filter/ separation.

Except for Alternative C, Alternative D could be implemented in the shortest period of time. Presently, as uncontaminated liquids entering the system are transported, they may become contaminated and act as a medium for transporting and distributing PCB's throughout the system. Not only does this provide a continuing means of spreading PCB contamination in the Texas Eastern system and movement of PCB's to other systems, but it provides a continuing source of potential exposure and expense of disposal because of the continuous supply and volume of contaminated_liquids requiring removal and disposal. Installation of dehydration equipment at the largest liquid input point on the system will provide dryer gas and reduce the quantity of liquids which provide a medium for transporting and distributing PCB's in the system. Alternative D by itself is basically more of a preventative program than a clean-up program and would require a pigging and drainage program in conjunction with it (as would Alternatives A, B, and C) to accomplish elimination of PCB contamination in the system. However, the dry condition of the gas and the reduction in the quantity of liquids being transported would enhance and expedite elimination of system PCB contamination utilizing pigging and drainage. Additionally, potential exposure and expense of disposal would be greatly reduced. An added benefit to this approach would be a reduction in the quantity of liquids (although uncontaminated) obtained due to retrograde condensation where pressure reduction occurs, particularly at customers meters. The largest contributor of liquids in the Texas Eastern system is the offshore Cameron area system. By installation of proper facilities, liquids from the Cameron system can be removed before they reach Gillis Station, where split flow occurs and the liquids are dispersed to main line systems. Reduction in dew points from a nominal seven (7) pounds per MMCF to three (3) pounds per MMCF by installation of dehydration equipment at Grand Chenier Station 1201993 will remove an estimated 321 gallons per day (or 117,165 gallons per year) of uncontaminated liquids entering the system.

Texas Eastern has been experimenting with Alternative E using methanol alcohol, diesel fuel, and clean condensate as flushing mediums. While this method has met with some degree of success, the results do not justify utilization of this method by itself as a means of preventing movement of PCB's to other systems or as a means of cleaning up the system. For one thing, such a program must, of necessity, originate on the upstream end of the system and progress downstream, otherwise incoming liquids will recontaminate the cleaned segments. This would be a prolonged process to achieve decontamination of the entire system. Secondly, it is not possible to perform such runs in some locations without installing additional scraper trap facilities and/or utilizing temporary receiver tanks, a potentially hazardous operation. Additionally, a limitation exists on the quantity of flushing medium that can be utilized in on-stream scraper runs. Also, the more flushing medium utilized the more liquid there is to be disposed of, at considerable expense since the flash point usually dictates disposal by incineration. However, scraper running, with or without a flushing medium as conditions dictate, can be used to great benefit in conjunction with filter/separator or dehydration equipment.

4. A discussion of the potential for human and environmental exposure to PCB's of each method.

The method utilizing the fewest personnel at the least number of liquid collection, transportation, and disposal locations will provide the least potential for human and environmental exposure to PCB's. Alternative A would require one or more people at every location at which gas leaves the system. It would also require activities related to the handling, transportation, and disposal of PCB at every such location. Similarly the number of people and activities involved unter Alternative B and C would be directly related to the number of filter/separator locations involved. Alternative D would require personnel to operate and maintain the equipment but no potential for human and environmental exposure to PCB's would exist due to location in the uncontaminated portion of the pipeline system. Alternative E would utilize the largest number of personnel, involve the widest range of activities, involve the greatest number of geographic locations, and presents the greatest potential for human and environmental exposure if a flushing medium is used. Of the above alternatives, it can be seen that Alternative D offers the least potential for human and environmental exposure, with Alternative C offering the next least potential.

1201334

PROPOSAL

In view of the above, Texas Eastern and Transwestern hereby propose for EPA consideration, implementation of a plan based on a combination of Alternatives C, D, and E for prevention of movement of PCB's to the systems of other companies

and elimination of PCB's from the Texas Eastern and Transwestern systems.

The plan consists of the installation of high efficiency filter/separators at a minimum of four (4) locations and installation of dehydration equipment at one (1) location on the Texas Eastern system, and the installation of a high efficiency filter/separator at one (1) location on the Transwestern system, as shown on the attached system maps identified as Attachment No. 3 and No. 4 respectively. Filter/separator locations proposed on the Texas Eastern system are Joaquin, Texas; Berne, Ohio; Lebanon (Station 16), Ohio; and Lambertville, New Jersey compressor stations. Dehydration equipment is proposed at Grand Chenier Station. A filter/separator is proposed at the Needles, Arizona measurement station on the Transwestern system.

The equipment proposed to be installed at these locations are filter/separators manufactured by Peerless Manufacturing and Perry Equipment Company (Peco). The filter/separators are two stage with the inlet gas passing through filters to agglomerate the small droplets and then the vane separator to remove the agglomerated liquids. The Peerless filter/separator is guaranteed to remove 100 percent of all droplets 8-10 microns and larger and 99.5 percent of those droplets sizes 1/2 to 8 microns. The Peco unit is guaranteed to remove 98 percent of all liquids and solids one micron and larger with 99.9 percent overall removal efficiency.

It is proposed that a modified Alternative E pipeline liquid cleanup program utilizing on-stream pigging, with or without a flushing medium as conditions warrant or permit, and periodic draining of valve bodies, orifice meters, etc. will be conducted in conjunction with operation of the centralized filter/separators and the dehydration facility.

It is estimated that installation of the filter/separators can be accomplished within approximately one year and the dehydration equipment within approximately 15 months from the date of approval of this plan by EPA. Estimated costs of the facilities is as follows:

Texas Eastern filter/separators	\$ 3,761,000
Texas Eastern dehydration equipment	8,500,000
Sub Total	12,261,000
Transwestern filter/separator	567,000
Takal	£12 020 000

Total \$12,828,000

Procedures that will be followed to assure worker safety and for handling, marking, storing, and disposing of PCB's are as contained in Attachment No. 1 and No. 2 respectively.

Effectiveness of the program will be monitored by periodic sampling of pipeline liquids for PCB's. The results of the sampling can be reported to EPA.

We trust this will provide you with the information requested in Mr. A. E. Conroy's letter of May 27, 1981. We will be glad to meet with you to further discuss any aspects of the program as you may desire. We stand ready to initiate this program upon your approval.

Sincerely.

1201095

F. L. Cohanan

TEXAS EASTERN

INTEROFFICE CORRESPONDENCE

TO:

F. L. Cohagan

CO/DIV Risk Mgmt/Safety

FROM.

W. W. Bednarsky

DATE January 29, 1981

SUBJECT:

Safe Practices and Protective Equipment To Be Used In Handling PCB-Contaminated Materials

Jobs may be performed where employees could be exposed to pipeline material possibly containing PCB. Such jobs could include removal of scrapers from scraper traps and pump-out of distillate storage tanks. In these cases, use of the personal protective equipment and clothing recommended below and adherence to the following recommended safe practices should protect our employees from PCB hazard.

Protective Equipment and Clothing

- 1. #8712 3M Organic Vapor Respirator
- 2. #K100 Kaycel Coverall with Elastic Wrist and Ankle
- 3. #749 BR 14" PVC Heavy Duty Gloves
- 4. #1400 Tingley Over-the-Shoe Boot
- 5. #160 Encon Goggle (or equivalent)

Safe Practices

Respirators, coveralls, gloves, boots, and goggles should be used only for the duration of one job at one location. If any article becomes soiled beyond use, it should be properly discarded and replaced. After use, protective equipment and clothing should be placed in fiber drums for storage.

Cloth rags should be used to soak up distillate from non-porous surfaces including scrapers if they are to be transported from the immediate job site. Used rags should be placed in fiber drums for storage. If distillate soaks into soil around the job site, the contaminated soil should be placed in fiber drums.

Sheet 1 of 7

, as ⊖ astern

INTEROFFICE CORRESPONDENCE

10:

F. L. Cohagan

CO/DIV. Risk Mgmt/Safety

FROM:

W. W. Bednarsky

DATE: January 29. 1981

SUBJECT:

Safe Practices and Protective Equipment To Be Used In Sampling Distillate That May Contain PCB

The following personal protective equipment should be used by employees when drawing samples of pipeline distillates that may be contaminated with PCB's. In addition, adherence to the safe practices outlined below should protect our employees from PCB hazard.

Personal Protective Equipment

- 1. #8712 3M Organic Vapor Respirator
- 2. #749 BR 14" PVC Heavy Duty Gloves
- #160 Encon Goggle (or equivalent)

Safe Practices

Employees taking samples should wear the personal protective equipment described above. As long as as this equipment shows no visible soiling or contamination, it could be used on successive samplings. However, if any article becomes visibly soiled, it should be placed in a heavy duty plastic bag with twist tie and transported to the nearest PCB storage site on Company property.

Each employee drawing samples of pipeline distillate that may contain PCB's should wash immediately with soap and water if the distillate contacts his skin. Employees should also wash thoroughly before eating or smoking and again at the end of the work day.

WWB: JET: hl

Sheet 2 of 7

f. L. Cohagan page 2 January 29, 1981

For proper storage of PCB-contaminated materials, see procedures outlined elsewhere.

If an employee's skin contacts PCB-contaminated material, he should wash immediately with soap and water. All employees working around PCB should wash thoroughly before eating or smoking and again at the end of the work day.

When handling distillate possibly containing PCB, employees should treat the distillate as a flammable liquid, observing usual restrictions for controlling flammability hazard.

The Safety Department will sample for airborne PCB as necessary during these operations. Results of PCB sampling will be permanently filed in the Safety Department and will be available to Gas Operations.

WWB: JET: hl

Sheet 3 of 7

TEXAS **○** EASTERN

INTEROFFICE CORRESPONDENCE

TO:

Mr. F. L. Cohagan

CO/DIV. Risk Mgmt/Safety

FROM:

W. W. Bednarsky

DATE. January 29, 1981

SUBJECT:

Procedure for Storage of Flammable Materials Containing PCB's - Large Quantities

Flammable and combustible liquids in excess of that permitted in inside storage rooms (see procedure for storing small quantities) shall be stored outside of buildings.

Storage of containers (not more than 60 gallons each) shall not exceed 1,100 gallons in one area. Areas shall be separated by a 5-foot clearance. Areas of storage shall not be nearer than 20 feet to a building.

The area shall be surrounded by a curb or earth dike at least 12 inches high. When curbs or dikes are used, provision shall be made for draining off accumulations of ground or rain water or spills of flammable or combustible liquids.

Storage areas shall be kept free of weeds, debris and other combustible material not necessary to the storage.

Adequate precautions shall be taken to prevent the ignition of flammable vapors. Sources of ignition include but are not limited to open flames, lightning, smoking, cutting and welding, hot surfaces, frictional heat, static, electrical, and mechanical sparks, spontaneous ignition including heat-producing chemical reactions, and radiant heat.

Hot work such as welding or cutting operations, use of spark-producing power tools, and chipping operations shall be permitted only under supervision of an individual in responsible charge.

Maintenance and operating practices shall be in accordance with established procedures which will tend to control leakage and prevent the accidental escape of flammable or combustible liquids. Spills shall be cleaned up promptly.

Sheet 4 of 7

Mr. F. L. Cohagan

2

January 29, 1981

Leaking containers shall have the contents transferred to an undamaged container. The leaking container should be retained in the storage area for proper disposal of containers that have been used for storage of PCB's.

Transfer of flammable liquids from one container to another shall be done only when containers are electrically interconnected (bonded).

Smoking shall be prohibited except in designated localities. If storage area is outside of previously designated no smoking area "No Smoking" signs shall be conspicuously posted and no smoking is to be permitted within 100 feet of flammable material.

At least one portable fire extinguisher (30 lb. dry chemical) shall be located not less than 25 feet nor more than 75 feet from the flammable liquid storage area.

Materials containing PCB's when heated to decomposition emit highly toxic fumes. Extinguishment of these materials should not be attempted without the use of self-contained breathing equipment.

WWB:CGC:mk

Sheet 5 of 7

TEXAS (EASTERN

INTEROFFICE CORRESPONDENCE

TO:

Mr. F. L. Cohagan

Risk Mgmt/Safety CO/DIV.

FROM:

W. W. Bednarsky

DATE:

January 30, 1981

SUBJECT: Procedure for Storage of Flammable Materials Containing

PCB's - Small Quantities

No more than 25 gallons of flammable or combustible liquids shall be stored in a room outside of an approved storage cabinet. Quantities of flammable and combustible liquid in excess of 25 gallons shall be stored in an acceptable or approved cabinet. Not more than 60 gallons of flammable or combustible liquids shall be stored in any one storage cabinet. Not more than three such cabinets may be located in a single storage area.

Electrical wiring and equipment located in inside storage rooms shall be approved for Class I Division I Hazardous Locations.

Every inside storage room shall be provided with either a gravity or a mechanical exhausting system.

In every inside storage room there shall be one clear aisle at least 3 feet wide.

Flammable or combustible liquids incidental to the principle business shall be stored in closed containers.

Open flames and smoking shall not be permitted in flammable or combustible liquid storage areas. Cabinets shall be labeled in conspicuous lettering, "Flammable - Keep Fire Away."

Maintenance and operating practices shall be in accordance with established procedures which will tend to control leakage and prevent the accidental escape of flammable or combustible liquids. Spills shall be cleaned up promptly.

At least one portable fire extinguisher (30 lb. dry chemical) shall be located outside of but not more than 10 feet from the door opening into any room used for storage.

At least one portable fire extinguisher (30 lb. dry chemical) must be located not less than 10 feet, nor more than 25 feet, from any flammable liquid storage area located outside of a storage room but inside a building.

1202001

Materials containing PCB's when heated to decomposition emit highly toxic fumes. Extinguishment of these materials should not be attempted without the use of self-contained breathing equipment.

L'12:CGC:cm

Sheet 6 of 7

TEXAS () EASTERN

INTEROFFICE CORRESPONDENCE

10:

F. L. Cohagan

CO/DIV Risk Mgmt/Safety

FROM:

W. W. Bednarsky

DATE:

January 29, 1981

SUBJECT:

Shipment of Small Quantities of Flammable Liquids

Via Common Carrier

The shipping of flammable liquids via common carrier is regulated by the Department of Transportation in 49CFR Parts 172-173. In general, shipping of limited quantities of flammable liquids are excluded from the packaging specification requirements of these regulations. Please refer to the following guidelines when offering flammable liquids with flash points above 73°F for shipment via common carrier.

GUIDELINES

Samples offered for shipment on a passenger carrying aircraft should be in metal containers not over one (1) quart capacity, packed in strong outside containers such as DOT 12B specification cardboard boxes. Only one (1) container of one (1) quart capacity is allowed per package.

Samples offered for shipment on a cargo only aircraft should also be in metal containers not over one (1) quart capacity, packed in strong containers. When shipping on cargo aircraft, however, each package may contain up to ten (10) gallons of flammable liquid.

Whether offered for shipment on passenger or on cargo aircraft, the outside package should bear labels indicating "flammable liquid." These labels are available through local vendors.

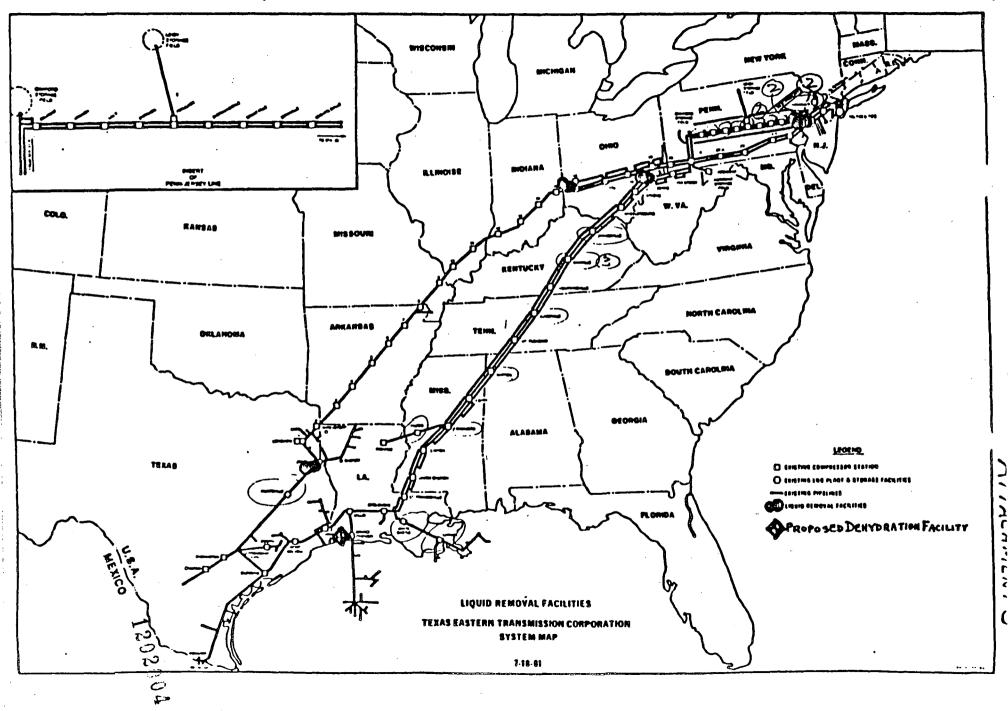
A final requirement for shipping via aircraft is the completion of the "Shipper's Certification for Restricted Articles." This form, furnished by the carrier upon request, is our means of informing the carrier of the proper shipping name, class, quantity, and flash point of the articles offered for shipment. For petroleum distillate the flash point should be shown as "above 73°F."

Sheet 7 of 7

F. L. Cohagan Page 2 January 29, 1981

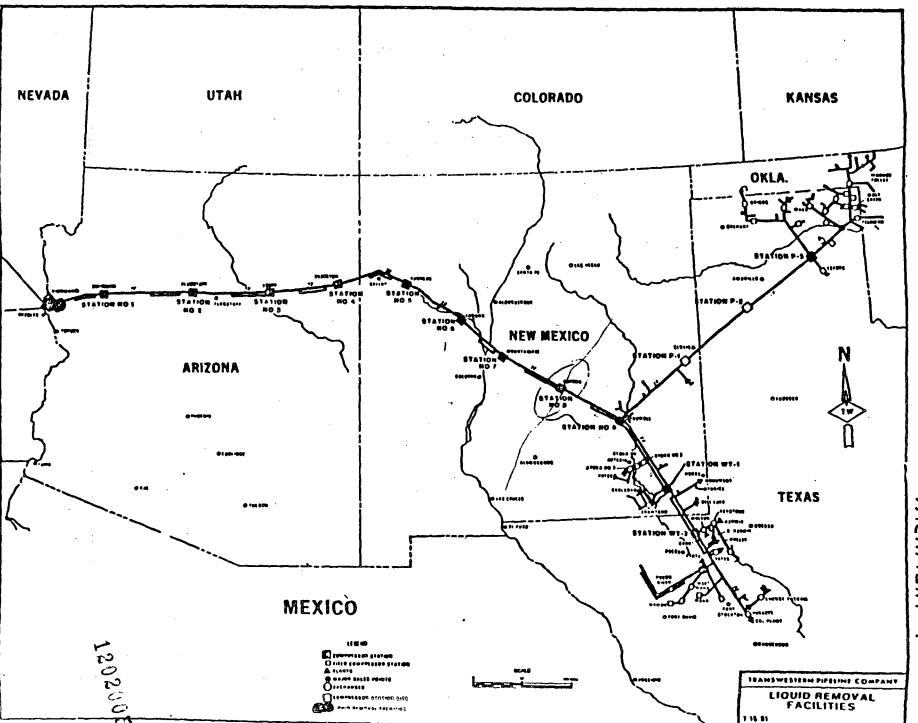
The requirements for shipping small quantities of flammable liquids by ground transportation carrier are essentially the same as for shipping by aircraft. The individual carrier should be contacted in advance to obtain the necessary shipper's certification forms.

WWB: JET: h1



1.22

212:11:



TACHMENT

TEXAS **EASTERN**

Transmission Corporation

WILLARD T. YOUNG MANAGER ENVIRONMENTAL CONTROL ENGINEERING SERVICES DIVISION

> August 13, 1981 OUR REF: 449-81

Mr. Terry Tillman Texas Department of Water Resources Solid Waste Section P. O. Box 13087, Capitol Station Austin, TX 78711

Dear Mr. Tillman:

Please find attached Industrial Solid Waste Management Inventory forms for our Transwestern's Halley Plant and Pyote Plant. These notifications are in accordance with § 156.22.01.106 of the Texas Department of Water Resources Industrial Solid Waste Management Regulations which requires any person who generates industrial solid waste to notify of such activity.

If there are any questions concerning these submittals, please contact Anita Cuevas at (713) 759-5318.

Very <u>truly</u> yours,

Willard f. **V**ouna

lanager, Environmental Protection

ANC/ds Attachments

w/attachments S. M. Dougherty

Dr. D. H. France

W. G. Marks G. O. Moe

Gerald Walker w/attachments✓

1202006

UR. 40502D

P.O. BOX 2521 HOUSTON, TEXAS 77001 (713) 759-3131



TEXAS DEPARTMENT OF WATER RESOURCES

INDUSTRIAL SOLID WASTE MANAGEMENT INVENTORY

RETURN TO:

TEXAS DEPARTMENT OF WATER RESOURCES SOLID WASTE SECTION P.O. BOX 13087, CAPITOL STATION AUSTIN, TEXAS 78711

INSTRUCTIONS

PLEASE RETURN WITHIN 30 DAYS

PART I: PART I is to be completed by everyone and begins on Page 2. An explanation for each item follows:

- A. If your firm generates industrial solid waste as defined by Assistable TDWR rules, check the box marked "yes" and complete both PART I and PART II of the Inventory. If your firm generates no waste, check "no" and complete only PART I.
- B. Give the name, the Texas mailing address (P.O. Box, City, State, Zip Code) and the physical location address (Street, City, State, Zip Code) of your company. Also give the mailing address of your firm's administrative or operational headquarters, if different.
- C. Give the address, city, county and zip code of any waste disposal site owned and/or controlled by your company which is not the same as, but is within 50 miles of your plant.
- D. Give the total number of persons employed at your plant.
- E. Give the name, title, area code and telephone number of the person TDWR should contact in regard to your company's solid waste disposal activities.
- F. Give the numbers of any permits previously issued to your company by TDWR or by the former TWQB (Industrial Wastewater Discharge or No Discharge Permits; Injection Well Permits, etc.)
- G. Describe the goods produced or services provided by your company at the plant site.
- H. Sign and date the Inventory certifying that the information you have supplied is both accurate and complete.

PART II: PART II begins on page 3 and continues through page 4. If your company is an industrial solid waste generator, you should complete items A-K for each waste you produce. Space is provided for listing six (6) wastes. If you should need more space, you may duplicate the blank form and/or attach any additional information as needed. An explanation for each item follows:

- A. In the first blank, give the sequence number of the waste; in the second blank, give the total number of wastes to be listed. For example: if you generate 2 wastes, the first waste listed will be waste no. 1 of 2; the second waste listed will be waste no. 2 of 2, etc.
- B. If it is available to you, give the S.I.C. Code for each manufacturing process as given by the Standard Industrial Classification Manual.
- C. Check the box indicating the form of the waste. If the waste is a sludge (part liquid, part solid), give the percentage of solids contained in the sludge.
- D. Give an estimate of the average amount of each waste produced each month and check one box to indicate the unit of measurement employed.
- E. Check one box to indicate whether the waste is primarily organic or inorganic.
- F. Enter data requested indicating characteristics of waste material and indicate type of unit or measurement used, if applicable. Indicate if waste is reactive by checking YES or NO.
- G. Give a description of the waste material, detailing all major components.
- H. Indicate if the waste is "hazardous", as defined by the U.S. Environmental Protection Agency, by checking YES or NO.

- Indicate the number of times per month the waste is shipped off-site.
- J. If the waste is stored, treated or disposed on-site, or if the waste is recovered for use or sale, check the on-site box and any other boxes indicating whether it is stored, treated, recovered or disposed. Note: "On-site" means within the property boundaries of a tract of land owned or effectively controlled by the waste generator or within 50 miles of the facility where the waste is produced. A disposal operation shall not be considered "on-site" if the waste is collected, handled, stored or disposed with wastes from generating points under different ownership.
- K. Describe (in detail) every facility involved in the on-site management of the waste named in letter G. above, giving facility types, sizes and capacities.

PART I : GENERAL INFORMATION				
A. Does your firm generate industri	ial Solid Waste(s) as defined in distant	TOWR Rules		
B. Company NameTRANSWESTE	ERN PIPELINE COMPANY - PYO	TE PLANT AND ST	ATION	
Plant - P.O. Box P. 0. Box	320	Pyote	TX	79777
	vote: S on Hwy 1927 for 7	city miles,	State TX	79777
Addre Headquarters (if other than above	011011 E E 1.25 00 5	ite City	State	Zip
P. O. Box 2521 , 1221		Houston	ΤX	77001
P.O. Box/Street		City .	State	Zip
C. Give the location of any dispo	sal site(s) controlled by your firm o	ther than plant or ma	nufacturing site list	ted in Section B above:
1.Puckett Plant	Fort Stockto	n Pecos	TX	79735
Location	City	County	State	Zip
2.Kevstone Plant Location	Kermit City	Winkler County	T X State	79745 Zip
3	City	County	State	Zip
D. Number of persons employed:	30			,
				
E. Person to be contacted regarding	g solid waste management:			
Willard T. Young, Man	ager, Environmental Protection	tion Phone:	713/759-5355 Area Code	Telephone Number
F. Give numbers of any TDWR pe	rmits, orders, etc. held, or applied fo	or, by your firm (spec	ify type):	
· TOWP Registration Num	ber 32144 for Marguerite H mitted for items C.1. and	lumphories Gas	Treatment Dla	nt, Hemphill Co.,
	ption of products manufactured: Nat			
Compressor station	<u> </u>			
				
	· · · · · · · · · · · · · · · · · · ·			
			٠	
H. I certify the information herein	is complete and accurate to the best o	f my knowledge:	•	1202008
(1) 574		•	0/10/-	
1 1 1-3	weights .		8/13/8/ para	
Willard I. Young; Man	ager, Environmental Prote	Ction.	,	
DWR-0060 (Rev. 8-19-80)			· · · · · · · · · · · · · · · · · · ·	

0 2 01 4

PART II : WASTE INVENTORY			
WASTE D	ESCRIPTION	DISPOSITION	
A. WASTE NO. 1 OF 3	B. SIC CODE (if known) 4922	1. NUMBER OF OFF-SITE WASTE SHIPMENTS REPRODUCTION Quarterly	
C. FORM: (check one) ☐ Solid ☑ Liquid ☐ Gas	D. Quantity generated per month: 6000 (estimated) Ø gallons pounds cubic yards	J. O ON-SITE WASTE MANAGEMENT - NA FACILITY USE: Storage Treatment Recovery Disposal	
Sludge/Slurry % solid	E. Predominately: 🗆 organic 💆 inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity)	
Flash Point 90.5 °C G. DESCRIPTION (major components):	NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH 7.4 Corrosion NA (mm/yr) Reactive Weste? Yes No water and liquid hydrocarbons	concrete lined surface impoundment 100'l x 34'w x 6'd	
H. IS THIS A HAZARDOUS WASTE AS D	EFINED BY THE U.S. EPA?		
A. WASTE NO. 2 OF 3	8. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS KER MORTH: quarterly	
C. FORM: (check one) Solid Liquid Gas	D. Quantity generated per month: 3200 (estimated) gellons pounds cubic yards	J. ON-SITE WASTE MANAGEMENT — NA FACILITY USE: Storage Treatment Recovery Disposel	
Flash Point 90.5 °C	E. Predominately: organic inorganic NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH 10.3 Corresion NA (mm/yr) Reactive Waste? Yes No engine room waste water	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) concrete lined surface impoundment 50'l x 50'w x 6'd	
H. IS THIS A HAZARDOUS WASTE AS D	EFINED BY THE U.S. EPA7 YES X NO		
A. WASTE NO. 3 OF 3	8. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PERMONYH: quarterly	
↑. FORM: (check one) ☑ Solid □ Liquid □ Gas	D. Quantity generated per month: 90 (estimated) gallons (2) pounds (2) cubic yards	J. ON-SITE WASTE MANAGEMENT - NA FACILITY USE: Storage Treatment Recovery Disposal	
F. CHARACTERISTICS: Toxicity Solubility NA (g/100g H ₂ 0 Flash Point NA °C G. DESCRIPTION (major components): filters M. IS THIS A HAZARDOUS WASTE AS D	Reactive Waste?	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) NA 120209	

	PART I : GENERAL IN	FORMATION	•	
A. Does your firm generate Industrial Solid W 凶 Yes 口 No	Vaste(s) as defined in America	TDWR Rules	THE STATE OF THE S	auge,
B. Company Name TRANSWESTERN PIP	ELINE COMPANY - HALLE	Y PLANT		
Plant - P.O. Box _P. 0. Box 1059		Kermit	TX	79745
P.O. Box		City	State	Zip
Plant - Street Address From Kermit: Address	S on Hwy 18 for 10 m turn left on Ranch R		State	79745 Zip
Headquarters (if other than above):	for 3 miles to site.			
P. O. Box 2521 , 1221 McKinn	ev	Houston .	тх	77001
P.O. Box/Street	<u> </u>	City	State	Zip
C. Give the location of any disposal site(s)	controlled by your firm other	than plant or m	anufacturing site list	ed in Section B above:
1 Puckett Plant	Fort Stockton	Pecos	TX	79735
Location	City	County	State	Zip
2 Keystone Plant	<u>Kermit</u>	Winkler	TX	79745
Location 3.	City	County	State	Zip
Location	City	County	State	Zip
D. Number of persons employed:1				
E. Person to be contacted regarding solid wa	aste management:			
Willard T. Young, Manager, E	nvironmental Protecti	ON Phone:	713/759-5355	
Name	Title		Area Code	elephone Number
F. Give numbers of any TDWR permits, ord	lers, etc. held, or applied for, b	y your firm (spe	cify type):	
TDWR Registration Number 321 TX. Applications submitted	44 for Marguerite Hum for items C.1. and C.	pheries Gas 2 no numb	Treatment Plan	nt, Hemphill Co.,
G. Nature of business and/or description of p	roducts manufactured: Natur	al gas treat	tment plant	
		· · · · · · · · · · · · · · · · · · ·		
			<u> </u>	
H. I certify the information herein is complete	te and accurate to the best of m	y knowledge:		1202010
() Corolamo	· \		8/13/81	
Willard T. Young, Manager, E	Environmental Protecti	on	Date	
TDWR-0060 (Rev. 8-19-80)				

C. FORM: (check one) D. Quantity generated per month: J. (DISPOSITION NUMBER OF OFF-SITE WASTE SHIPMENTS PRIX.MENIX.M.X. biannually
C. FORM: (check one) D. Quantity generated per month: J. [
☐ Liquid ☐ gallons ☐ pounds ☐ cubic yards ☐ Gas	FACILITY USE: Storage Treatment Recovery Disposal
F. CHARACTERISTICS: Toxicity NA (LD ₅₀ , LC ₅₀ , LDL ₀) pH 7.5 Solubility NA (g/100g H ₂ 0) Corrosion NA (mm/yr) Flash Point 82 °C Reactive Waste?	FACILITY DESCRIPTION: (indicate Type, Size, Capacity) Concrete surface impoundment 39' x 39' at bottom 75' x 75' at top 6' depth
A WASTE NO. 2 OF 2 R SIC CODE (if known) 4922 L.	NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
C. FORM: (check one) D. Quantity generated per month: J. 1	Ø ON-SITE WASTE MANAGEMENT — FACILITY USE: □ Storage □ Treatment □ Recovery Ø Disposal
	. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) Landfill
H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? DYES DE NO	
	NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
☐ Solid ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	ON-SITE WASTE MANAGEMENT — FACILITY USE: Storage Treatment Recovery Disposal
Sludge/Slurry% solid E. Predominately: □ organic □ inorganic K. I F. CHARACTERISTICS: Toxicity(LD ₅₀ , LC ₅₀ , LDL ₀) pH Solubility(g/100g H ₂ 0) Corrosion(mm/yr) Flash Point°C Reactive Waste? □ Yes □ No G. DESCRIPTION (major components): H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? □ YES □ NO	FACILITY DESCRIPTION: (indicate Type, Size, Capacity)

TEXAS () EASTERN Transmission Corporation

WILLARD T. YOUNG MANAGER ENVIRONMENTAL CONTROL ENGINEERING SERVICES DIVISION



July 14, 1981 OUR REF: 376-81

Mr. Terry Tillman
Texas Department of Water Resources
Solid Waste Section
P. O. Box 13087, Capitol Station
Austin, TX 78711

Dear Mr. Tillman:

Please find attached an Industrial Solid Waste Management Inventory form for our Transwestern WT-II facility.

If there are any questions concerning this submittal, please call Anita Cuevas at 713/759-5318.

Very truly yours

lanager Engironmental Protection

ANC/jc Attachments

bcc: Stirling Dougherty - w/attachments

Dr. D. H. France Richard Kruse W. G. Marks George Moe

Gerald Walker - w/attachments

1202012

2-16-81 A-PU.0502D

	RT I : GENERAL	INFORMATIO		
. Does your firm generate Industrial Sc No No	olid Waste(s) as defined in	TDWR Rules	konzernesió/Nadole)	(Princial)
. Company NameTranswester	m Pipeline Company _	WT-II Station		
Plant - P.O. Box P. O. Box 1	1059	Kermit,	Texas	79745
		City	State	Zip
Plant - Street Addressfrom_Kerm		<u>Kermit</u>	<u>Texas</u>	79745
Headquarters (if other than above): H	les, turn right on alley Ranch Road for miles to the site	City		77001
P. O. Box 2521		Houston,	Texas	7/001 Zip
Give the location of any disposal si	te(s) controlled by your firm	other than plant or ma	nufacturing site list	ted in Section B above:
1. Puckett Plant	Fort Stockton	Pecos	Texas	79735
Location	City	County	State	Zip
2. Keystone Plant	<u>Kermit</u>	Winkler	Texas	79745 Zip
- Constituti	. City	County	State	4·ID
Location	City	County	State	Zip
Number of persons employed:	3			
Willard T. Young Name Give numbers of any TDWR permits Applications filed - numbers		for, by your firm (spec	ify type):	Telephone Number
Nature of business and/or description	of products manufactured:	Natural Gas Tra	Insmission	
I certify the information herein is con	mplete and accurate to the best	of my knowledge:	<u>.</u>	120201

9WR-0060 (Rev. 8-19-80)

.

PART II : WASTE INVENTORY		
WASTE DESCRIPTION		DISPOSITION
A. WASTE NO. 1 OF 3	B. SIC CODE (if known) 4922	1. NUMBER OF OFF-SITE WASTE SHIPMENTS NEW MONTHS quarterly
C. FORM: (check one) Solid Liquid	D. Quantity generated per month:	J. ON-SITE WASTE MANAGEMENT - NA FACILITY USE: Storage Treatment Recovery Disposal
Sludge/Slurry % solid	E. Predominately: 🛛 organic 🗀 inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity)
Solubility <u>NA</u> (g/100g H ₂ 0) Flash Point 85 °C G. DESCRIPTION (major components):		concrete underground tank (60'l x 60'w x 5'd) is used to accumulate the waste for off-site disposal.
H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? 😡 YES 🗆 NO		
A. WASTE NO. 2 OF 3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
C. FORM: (check one) Solid Liquid Gas	B. Quantity generated per month: 400 (estimated) gallons pounds cubic yards	J. E) ON-SITE WASTE MANAGEMENT — FACILITY USE: E) Storage Treatment Recovery Disposal
•	E. Predominately: organic inorganic inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity) earthen evaporation impoundment 65'1 x 60'w x 5'd
H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA?		
A. WASTE NO3 OF3	B. SIC CODE (if known) 4922	I. NUMBER OF OFF-SITE WASTE SHIPMENTS PER MONTH:
C. FORM: (check one) Solid Liquid Ges	D. Quantity generated per month: 300 (estimated) gellons (spounds cubic yards	LE ON-SITE WASTE MANAGEMENT — FACILITY USE: □ Storage □ Treatment □ Recovery E Disposal
Sludge/Slurry% solid	E. Predominately: 🗆 organic 🗔 Inorganic	K. FACILITY DESCRIPTION: (indicate Type, Size, Capacity)
F. CHARACTERISTICS: Toxicity NA (LD ₂₀ , LC ₂₀ , LDL ₀) pH NA Solubility NA (g/100g H ₂ 0) Corresion NA (mm/yr) Flash Point NA °C Reactive Waste? Yes 29 No G. DESCRIPTION (major components): trash, filters		landfill 6'w x 20'l x 5'd
H. IS THIS A HAZARDOUS WASTE AS DEFINED BY THE U.S. EPA? YES NO TOWN-0060 (Rev. 8-19-80)		

TRANSWESTERN (Pipeline Company

A TEXAS EASTERN COMPANY

F. L. COHAGAN VICE PRESIDENT

May 21, 1981

Mr. Greville L. Way, Chief Gas Engineer Public Utilities Commission, California California State Building San Francisco, California 94102

Dear Mr. Way:

This is to acknowledge receipt of your letter dated May 13, 1981 concerning sampling of pipeline liquids for possible PCB content.

Since the reported occurrence in the New York City area, Transwestern has participated in several joint meetings with Federal Environmental Protection Agency (USEPA), Federal Energy Regulatory Commission, Interstate Natural Gas Association of America (INGAA), and other interstate gas transmission companies concerning the possibility of PCB's in pipeline liquids. Transwestern is actively participating in a national sampling program utilizing standardized procedures and a quality assurance program established by USEPA.

Transwestern's program does include sampling of liquids from our gas pipelines entering the State of California. Results of these samples will be made to USEPA for correlation with data from other gas companies, including distribution companies. Should results indicate a need, I am sure additional samples will be taken.

We understand from this extensive and comprehensive nationwide program, managed by the USEPA, results are expected to be obtained that will satisfy your desires for information concerning PCB's as it relates to the State of California.

Very truly yours,

bcc: Messrs. B. C. Andrews

L. H. Clark J. D. Head

H. H. King

R. E. Moore's Office

J. T. Verkler F. Wichlep

J. C. Williams

W. T. YOUNG HOUSTON, TEXAS 77001 (713) 759-4437

G. H. Ewing

ADDRESS ALL COMMUNICATIONS TO THE COMMISSION CALIFORNIA STATE BUILDING SAN FRANCISCO CALIFORNIA 94102 TELEPHONE 1415, 557- 1938

1865 1 1981

NEC .

Public Utilities Commission

STATE OF CALIFORNIA

PILE NO LLIT

May 13, 1981

Transwestern Pipeline Company P. O. Box 2521 Houston, Texas 77001

Attention: George H. Ewing

President and Chief Executive Officer

Gentlemen:

Since the discovery of polychlorinated biphenyls (PCB) in January 1981, in the New York City area, natural gas pipeline companies and gas distribution utilities have coordinated with various governmental agencies in an effort to determine the severity and source of the problem.

We have received the test results of the condensate sampling conducted by El Paso Natural Gas Company and a map showing the location of the sampling points.

Will you please send us a copy of the test results obtained from your sampling program, and a system map showing the sampling locations. If you have not already done so, we would like to share the information with your California customer, Pacific Lighting Service Company. If you have questions concerning this matter, please call T. W. White at (415) 557-1938.

Very truly yours,

Greville L. Way

Chief Gas Engineer

I. NON-REGULATED STATUS

Print/Type Name

Title

IVIRONMENTAL PROTECTION AGENCY

GENERATOR BIENNIAL HAZARDOUS WASTE REPORT FOR 1985

This report is for the calendar year ending December 31, 1985 Read All Instructions Carefully Before Making Any Entries on Form

Complete this section only if you did not generate regulated quantities of hazardous waste at any time during the 1985 calendar year. Circle the one code at right that best describes your status during the entire year (see instructions for explanation of codes).	1) Non-handler 2 Small Quantity Generator 4 Exempt 5 Beneficial Use 9 Out of Business
	This Installation's Non-Regulated Status is Expected to Apply:
II. GENERATOR'S EPA I.D. NUMBER	☑ For 1985 Only ☐ Permanently
[FNM 13 6 0 1 0 5 7 3 5 7 1	Other
1 2 13 14 15	C303 ENTRY (OFFICIAL USE ONLY):
III. NAME OF ESTABLISHMENT	COURT OFFICIAL USE ONLY):
stattoni si transwestern	
30	69
IV. ESTABLISHMENT MAILING ADDRESS	
[3]P D B O X 11 18 8	111111111111111111111111111111111111111
Street or P.O. Box	
[4]	T X 7 7 0 0 1
City or Town	State Zip Code
V. LOCATION OF ESTABLISHMENT (if different than section	n IV above)
[5] 1. b 1 B b k	
15 16 Street or Route number	45
[6]C A P F F A N	
15 16 City or Town	41 42 47 51 State Zip Code
VI. ESTABLISHMENT CONTACT [2] B A Y S , D A V I D	
15 16	45
Name (last and first)	
7 1 3 6 5 4 6 1 0 9	12029
Phone No. (area code & no.)	
VII. CERTIFICATION I certify under penalty of law that I have personally examined and am familiar w documents, and that based on my inquiry of those individuals immediately resp submitted information is true, accurate, and complete. I am aware that there are including the possibility of fine and imprisonment.	onsible for obtaining the information, I believe that the
۷,	1072
David Bays. Mgr. Codes & Environment	and Day 2/11/86

Signature

Date Signed

Page 1 of

Page 1 of

VIRONMENTAL PROTECTION AGENCY

GENERATOR BIENNIAL HAZARDOUS WASTE REPORT FOR 1985

This report is for the calendar year ending December 31, 1985 Read All Instructions Carefully Before Making Any Entries on Form

I.	NON-R	EGUL	ATED	STAT	US
	Comple	to this	section	بامدد	if .

Complete this section only if you did not generate regulated quantities of hazardous waste at any time during the 1985 calendar year. Circle the one code at right that best describes your status during the entire year (see instantians)

- Non-handler
- **Small Quantity Generator**

explanation of codes).	5	Beneficial Use Out of Business	
ease print/type with elite type (12 characters per inch)	This Installation's No	n-Regulated Status is Expected t	o Apply:
II. GENERATOR'S EPA I.D. NUMBER	⊠ For 198	5 Only Permane	ntly
T/AC F N M D 0 0 0 7 2 9 0 5 3	Other_		
III. NAME OF ESTABLISHMENT	C303 ENT	RY (OFFICIAL USE ONLY):	
SITIAITION 17 TRASNWESTE	le lui le it le le it	IT IN EL ICIOL I	
30	KINI IFILIFIEID	II IN E I IC O I I	69
V. ESTABLISHMENT MAILING ADDRESS			
3 P		45	
Street or P.O. Box			
4] H O U S T O N	1 T X 41 4	7 7 0 0 1 2 47 51	
City or Town	Stat	e Zip Code	
V. LOCATION OF ESTABLISHMENT (if different than s	ection IV above)	45	
Street or Route number		la la la la la l	
6M b u h r A r h A r R	1	8 7 0 3 6 2 47 51	
City or Town	State	Zip Code	
VI. ESTABLISHMENT CONTACT 2] B A Y S , D A V I D			To or a leasure
15 16 Name (last and first)		45	
7 1 3 1 6 5 4 1 6 1 d 9			= 0.010
46 55	•		1202
Phone No. (area code & no.)			
VII. CERTIFICATION I certify under penalty of law that I have personally examined and am fal documents, and that based on my inquiry of those individuals immediate submitted information is true, accurate, and complete. I am aware that the submitted information is true, accurate, and complete.	ely responsible for obtaining the	information, I believe that the	
including the possibility of fine and imprisonment.	Λ -	· _	
David Bays, Mgr. Codes & Environment	Waird Ba	r 2/11/80	
Print/Type Name Title	Signature	Date Signed	

GENERATOR BIENNIAL HAZARDOUS WASTE REPORT FOR 1985

I. NON-REGULATED STATUS		• 1
Complete this section only if you did not generate regulated	1 Non-handler	
quantities of hazardous waste at any time during the 1985 calendar year. Circle the <u>one</u> code at right that best describes	2 Small Quantity Generator	
your status during the entire year (see instructions for	4 Exempt	,
explanation of codes).	5 Beneficial Use	;
	9 Out of Business	
	is Installation's Non-Regulated Status is Expected to Apply:	
II. GENERATOR'S EPA I.D. NUMBER	For 1985 Only	**
T/AC	N.	1.
FN M D 0 0 0 17 12 19 10 10 14 11 11	☐ Other	- } . }
1 2 13 14 15	Cana Pirov Coricial Lies Auga III	_
HI NAME OF FOUR PLOT A SPACE	C303 ENTRY (OFFICIAL USE ONLY):	٠. :
III. NAME OF ESTABLISHMENT		٠. ١
STALI 61 TRANSWESTERNI PITE	PELINE CO	•
30	69	
		- .
IV. ESTABLISHMENT MAILING ADDRESS		i .·.
ा । । । । । । । । । । । । । । । । । । ।		•
15 16	45	
15 16 Street or P.O. Box	45 45	
15 16 Street or P.O. Box [4] H D U S T D N	45 T X 7 7 0 0 1	
15 16 Street or P.O. Box	45 T X 7 7 0 0 1 41 42 47 51 State Zip Code	
15 16 Street or P.O. 8ox 4 H D U S T D N	41 42 47 51 State Zip Code	
15 16 Street or P.O. Box AH P U S T D N	41 42 47 51 State Zip Code	
15 16 Street or P.O. 8ox 4 H D U S T D N	41 42 47 51 State Zip Code	
TS 16 Street or P.O. Box A H D U S IT D N	41 42 47 51 State Zip Code	
TS 16 Street or P.O. Box A	41 42 47 51 State Zip Code	
TS 16 Street or P.O. Box AH DUSTDN TS 16 City or Town V. LOCATION OF ESTABLISHMENT (if different than section I SP . D . BOX B	State Zip Code IV above) 45	
15 16 Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6	
15 16 Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6 41 42 47 51	
15 16 Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6	
15 16 Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6 41 42 47 51	
15 16 Street or P.O. Box A H O U S IT D N 15 16 City or Town V. LOCATION OF ESTABLISHMENT (if different than section I 5 P . D . B O X B L 15 16 Street or Route number 6 L A D N A 15 16 City or Town VI. ESTABLISHMENT CONTACT	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6 41 42 47 51	
15 16 Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6 41 42 47 51	
15 16 Street or P.O. Box A H O U S IT D N 15 16 City or Town V. LOCATION OF ESTABLISHMENT (if different than section I 5 P . D . B O X B L 15 16 Street or Route number 6 L A D N A 15 16 City or Town VI. ESTABLISHMENT CONTACT	41 42 47 51 State Zip Code IV above) N M 8 7 0 2 6 41 42 47 51 State Zip Code	
Street or P.O. Box [4]H D U S T D N	41 42 47 51 State Zip Code IV above) N M 8 7 0 2 6 41 42 47 51 State Zip Code	
15 16 Street or P.O. Box A	41 42 47 51 State Zip Code IV above) 45 N M 8 7 0 2 6 41 42 47 51	

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

David	Bays.	Mgr.	Codes	&	Environment
	Print/Typ	e Name			Title

EPA Form 8700-13A(5-80) (Revised 11-85)

GENERATOR BIENNIAL HAZARDOUS WASTE REPORT FOR 1985

NON-REGULATED STATUS	and appear reference and after the field securities in an electric reference on the control of t
Complete this section only if you did not generate regulated quantities of hazardous waste at any time during the 1985 calendar year. Circle the one code at right that best describes your status during the entire year (see instructions for	Non-handler Small Quantity Generator Exempt
explanation of codes).	5 Beneficial Use 9 Out of Business
ase print/type with elite type (12 characters per inch)	This Installation's Non-Regulated Status is Expected to Apply:
. GENERATOR'S EPA I.D. NUMBER T/AC	28 For 1985 Only Permanently
N M D 0 9 4 1 3 9 5 9 9 7 7 13 14 15	
I. NAME OF ESTABLISHMENT	C303 ENTRY (OFFICIAL USE ONLY):
TATION 5 TRANSWESTER	N PIPELIINE CO 69
/. ESTABLISHMENT MAILING ADDRESS	
3]P . 0 . B 0 x 1 1 8 8	45
treet or P.O. Box ПНО [U S T O N	
5 16 ity or Town	41 42 47 51 State Zip Code
. LOCATION OF ESTABLISHMENT (if different than secti	ion IV above)
5 P 1.	45
5thbkkkullllllllllll	1 1 1 N M 18 17 13 12 13 1 41 42 47 51
ity or Town	State Zip Code
II. ESTABLISHMENT CONTACT BB A k B I, D A V I D	45
1912 o. d. 1 o d d <u>-</u> b 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	45
	120
PBAYS, DAVID	120
	with the information submitted in this and all attached

Print/Type Name EPA Form 8700-13A(5-80) (Revised 11-85)

David Bays, Mgr. Codes & Environment

Page 1 of

HAZARDOUS WASTE GENERATOR AND TSD REPORT

Page 1 of 2

(1)	FACILITY NAME:	Transwestern Pipeline Company
		Station No. 4
(2)	LOCATION:	P. O. Box 517
	·	Sanders, AZ 86512
		25 miles North of Chanbers, AZ on highway 63
(3)	MAILING ADDRESS:	
		P. O. Box 512
		Sanders, AZ 86512
(4)	COUNTY:	
		Navajo Indian Reservation
(5)	EPA IDENTIFICATION N	IUMBER:
		AZT000624593
(6)	FACILITY TYPE:	
		
· (7)	ANNUAL REPORT YEAR	
400		1985
(8)	CONTACT:	David & Bassa
	TELEPHONE NUMBER	David Bays (713) 654-6109
	·	
(9)	REVISED CLOSING CO	278
(5)	•	
(10)	REVISED POST-CLOS	JRE COSTS:
	, '	
(11)	info the com	tify under penalty of law that I have personally examined and am familiar with the rmation submitted in this and all attached documents, and based on my inquiry of information. I believe that the submitted information is true, accurate, and plete. I am aware that there are significant penalties for submitting false informationing the possibility of fine and imprisonment.
		12020
		SIGNATURE/DATE: David Bay 2/11/86
		NAME/TITLE: David Bays, Manager
		Codes & Environment

EPA IO Number:

AZT000624593

Page 2 at 2

(12) WASTE, PHYSICAL DESCRIPTION, AND CONCENTRATION					3) NATED SITE	
Chemical Name or Description	EPA Weste No.	Physical Description	Cone. mg/l %	Amount	Units	
No Activity						
•						-
		•				
		,				·
•						
		.				202
				1 6 6 1 1 1 1 2	12/	

HAZARDOUS WASTE GENERATOR AND TSD REPORT

Page 1 of 2

(1)	FACILITY NAME:	Transwestern Pipeline Co. Station No. 2
(2)	LOCATION:	T22N, R5E Section 16,A73
(3)	MAILING ADDRES	S: P.O. Box 370 Flagstaff, AZ 86001
(4)	COUNTY:	Coconino
(5)	EPA IDENTIFICAT	ON NUMBER: AZT050010768
(6)	FACILITY TYPE:	
(7)	ANNUAL REPORT	YEAR: 1985
(8)	CONTACT: NAME: TELEPHONE NUM	David Bays IBER: (713) 654-6109
(9)	REVISED CLOSING	COSTS:
(10)	REVISED POST-C	LOSURE COSTS:
(11)	CERTIFICATION:	I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and based on my inquiry of the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.
		SIGNATURE/DATE: David Bays Manager Codes and Environment

Page 2 of 2

EPA ID Nunsoer:

AZT050010768

Waste, Physic Cond	(12) AL DESCRIPTION ENTRATION	I, AND		(1: GENEF ON-S	ATED
Chemical Name or Description	EPA Waste No.	Physical Description	Conc.	Amount	Units
No Activity					
•					
		•			
_					
				·	
•					
· ·		· ·			- 0.9 1)
		Control Contro			2020
Anderson and the second and the seco					
		t the same and a second se			

HAZARDOUS WASTE GENERATOR AND TSD REPORT

Page 1 of 2

Transwestern Pipeline Co. Station No. 1	
Kingman, AZ 86401	•
Mohave	
ION NUMBER: AZT050010784	
1985	
David Bays	
G COSTS:	
LOSURE COSTS:	
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and based on my inquiry of the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.	
12020	25
SIGNATURE/DATE: David Bays. Manager Codes and Environment	
	Station No. 1 Mohave ION NUMBER: AZT050010784 YEAR: 1985 David Bays (713) 654-6109 G COSTS: CLOSURE COSTS: Locatify under penalty of law that I have personally examined and am familiar with the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. \$\frac{202}{3}\$ SIGNATURE/DATE: David Bays. Manager

Page 2 of 2

EPA ID Number:

AZT050010784

(12) Waste, Physical Description, and Concentration				WASTE, PHYSICAL DESCRIPTION, AND		
Chemical Name or Description	EPA Waste No.	Physical Description	Cor mg/l		Amount	Units
No Activity	·					
•						
tion of the second seco						
	`					
						<u>-</u>
•						
						•
						12
						12

HAZARDOUS WASTE GENERATOR AND TSD REPORT

Page 1 of 2

(1)	FACILITY NAME:	Transwestern Pipeline Co. Station No. 3
(2)	LOCATION:	T22N; R14E; Coconino Co.; A4O Navajo Indian Reservation; Luepp, AZ
(3)	MAILING ADDRESS	Rural 61 Luepp, AZ 86047
(4)	COUNTY:	Navajo Indian Reservation
(5)	EPA IDENTIFICATIO	ON NUMBER: AZT050010750
(6)	FACILITY TYPE:	
(7)	ANNUAL REPORT Y	EAR: 1985
(8)	CONTACT: NAME: TELEPHONE NUME	David Bays BER: (713) 654-6109
(9)	REVISED CLOSING	COSTS:
(10)	REVISED POST-CL	OSURE COSTS:
(11)	i 1	certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and based on my inquiry of the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.
		120202
		SIGNATURE/DATE: David Bays, Manager Codes & Environment

Page 2 of 2

EPA ID Number:

AZT050010750

Waste, Physic	(13) GENERATED ON-SITE					
Chemical Name or Description	EPA Waste No.	Physical Description	Con mg/l		Amount	Units
No Activity						
•						
		·		-		
		•				
						·
· · · · · · · · · · · · · · · · · · ·						
						•
·						
						1202

HAZARDOUS WASTE GENERATOR AND TSD REPORT

Page 1 of 2

(1)	FACILITY NAME:	Transwestern Pipeline Co. Needles Measurement Station
(2)	LOCATION:	5 Miles North of Needles
(3)	MAILING ADDRES	S: P.O. Box 5117 Mohave Valley, Az 86440
(4)	COUNTY:	Mohave
(5)	EPA IDENTIFICAT	ION NUMBER: AZT050010776
(6)	FACILITY TYPE:	·
(7)	ANNUAL REPORT	YEAR: 1985
(8)	CONTACT: NAME: TELEPHONE NUM	David Bays ABER: (713) 654-6109
(9)	REVISED CLOSING	i COSTS:
(10)	REVISED POST-C	LOSURE COSTS:
(11)	CERTIFICATION:	I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and based on my inquiry of the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.
		120202
		SIGNATURE/DATE: David Bays, Manager

Page 2 of 2

EPA ID Number:

AZT050010776

WASTE, PHYS	(13) GENERATED ON-SITE					
Chemical Name or Description	EPA Physical Waste No. Description		Con mg/l			Units
No Activity						
•						
	·					
		·				
		•				
						,
•						
						- <u>-</u>
		•				1202
		,		-		

TRANSWESTERN

A SUBSIDIARY OF HOUSTON NATURAL GAS

TRANSWESTERN PIPELINE COMPANY P.O. Box 1188 Houston, Texas 77001 (713) 654-6161

April 21, 1986

U. S. EPA, Region 9 215 Fremont Street San Francisco, CA 94105

Attn: T-2-1

Dear Sirs:

Please find attached the waste minimization statements for the following Transwestern Pipeline Co. facilities:

Needles Measurement Station Compressor Station No. 1 Compressor Station No. 2 Compressor Station No. 3 Compressor Station No. 4.

These facilities are all Transwestern location within Arizona.

If any further information is required, please call me at (713) 654-6109, or at the address above.

Sincerely yours,

David Bays

Manager Codes & Environment

xc; Mr. J. D. Harp Mr. L. G. Langston file

Generator Biennial Hazardous Waste Report for 1985 (cont.)

This report is for the calendar year ending December 31, 1985

Date rec'd

torid by

XV. GENERATOR'S EPA I.D. NO.

T/A C

ENZTOSOO1107126

XVI. WASTE MINIMIZATION (narrative description)

Transwestern Pipeline Co. Needles Measurement Station P. O. Box 5117 Mohave Valley, AZ 86440

There is presently no waste regulated under RCRA generated, stored, or disposed of at this location.

This facility does generate waste (PCB contaminated pipeline liquids) which is regulated under 40 CFR §761 as authorized by ToSCA. All PCB contaminated liquids are shipped off site for incineration as prescribed in 40 CFR §761.60.

The on-going program of pipeline cleaning and maintenance has reduced the average PCB concentration in the liquids to below 200 ppm.

ear out her

Generator Biennial Hazardous Waste Report for 1985 (cont.)

This report is for the calendar year ending December 31, 1985

XV. GENERATOR'S EPA I.D. NO.

T/A C

Chkroppppppk Mi

XVI. WASTE MINIMIZATION (narrative description)

Transwestern Pipeline Co. Compressor Station No. 1 P. O. Box 3757 Kingman, AZ 86401

There is presently no waste regulated under RCRA generated, stored, or disposed of at this location.

This facility does generate waste (PCB contaminated pipeline liquids) which is regulated under 40 CFR \$761 as authorized by ToSCA. All PCB contaminated liquids are shipped off site for incineration as prescribed in 40 CFR \$761.60.

The on-going program of pipeline cleaning and maintenance has reduced the average PCB concentration in the liquids to below 200 ppm.

ear out her

Generator Biennial Hazardous Waste Report for 1985 (cont.)

This report is for the calendar year ending December 31, 1985

Date recon.

Rec'd to

XV. GENERATOR'S EPA I.D. NO.

/A C

Chzrbsbbbbbbbb

XVI. WASTE MINIMIZATION (narrative description)

Transwestern Pipeline Co. Compressor Station No. 2 P. O. Box 370 Flagstaff, AZ 86001

There is presently no waste regulated under RCRA generated, stored, or disposed of at this location.

This facility does generate waste (PCB contaminated pipeline liquids) which is regulated under 40 CFR \$761 as authorized by ToSCA. All PCB contaminated liquids are shipped off site for incineration as prescribed in 40 CFR \$761.60.

The on-going program of pipeline cleaning and maintenance has reduced the average PCB concentration in the liquids to below 200 ppm.

ear out her

Generator Biennial Hazardous Waste Report for 1985 (cont.)

This report is for the calendar year ending December 31, 1985

Date rec'd:

Rec'd b

XV. GENERATOR'S EPA I.D. NO.

T/A C

AZT050010750

XVI. WASTE MINIMIZATION (narrative description)

Transwestern Pipeline Co. Compressor Station No. 3 P. O. Box Rural 61 Winslow, AZ 86047

There is presently no waste regulated under RCRA generated, stored, or disposed of at this location.

This facility does generate waste (PCB contaminated pipeline liquids) which is regulated under 40 CFR §761 as authorized by ToSCA. All PCB contaminated liquids are shipped off site for incineration as prescribed in 40 CFR §761.60.

The on-going program of pipeline cleaning and maintenance has reduced the average PCB concentration in the liquids to below 200 ppm.

ear out hen

1202035

PAGE. ..

nf

Generator Biennial Hazardous Waste Report for 1985 (cont.)

This report is for the calendar year ending December 31, 1985

are recon Reco

XV. GENERATOR'S EPA I.D. NO.

T/A C

AZT000624593

XVI. WASTE MINIMIZATION (narrative description)

Transwestern Pipeline Co. Compressor Station No. 4 P. O. Box 517 Sanders, AZ 86512

There is presently no waste regulated under RCRA generated, stored, or disposed of at this location.

This facility does generate waste (PCB contaminated pipeline liquids) which is regulated under 40 CFR \$761 as authorized by ToSCA. All PCB contaminated liquids are shipped off site for incineration as prescribed in 40 CFR \$761.60.

The on-going program of pipeline cleaning and maintenance has reduced the average PCB concentration in the liquids to below 200 ppm.

ear out hen

ATTACHMENT 7.1

U.S. EPA Guidelines
For Sampling Pipeline PCBs



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460

F. L. COHAGAN

DEC 7 1981

OFFICE OF PESTICIDES AND TOXIC SUBSTANCES

F. L. Cohagan Vice President Texas Eastern Gas Pipeline Company P.O. Box 2521 Houston, Texas 77001

Dear Mr. Cohagan:

In my letter to you of November 9, 1981, I mentioned that a suggested monitoring plan for transmission companies implementing remedial measures would be forwarded to you. A copy of this <u>suggested</u> monitoring plan is enclosed.

It is suggested that you adapt this plan to meet the needs of your company's specific PCB contamination problem and remedial measures program. Please keep the Agency informed of your remedial activities and the results of your monitoring. Correspondence concerning these matters should be addressed to:

John S. Seitz, (EN-342) Environmental Protection Agency 401 M Street, S.W. Washington, D.C. 20460

As remedial and monitoring programs are implemented, EPA will continue to work closely with <u>each</u> transmission company to determine the need for: <u>modifications</u> to <u>remedial programs</u>, <u>continued monitoring</u>, or <u>curtailment</u> of monitoring activities when contamination problems are solved.

Thank you for your cooperation in this matter. If you have any questions concerning monitoring, please contact John Seitz at 202-472-3701.

Sincerely yours,

n

A. E. Conroy II, director Pesticides and Tox Substances Enforcement Division

A.E. Conson

Enclosure

SUGGESTED TRANSMISSION COMPANY REMEDIAL MONITORING

I. BACKGROUND

Earlier this year, several natural gas transmission companies which participated in the EPA/gas industry cooperative sampling program identified PCB levels at or greater than 50 ppm in condensate from portions of their systems. These companies have instituted remedial programs to rectify this contamination problem. This document sets forth a suggested monitoring program which will supply information needed by the companies and EPA to determine the success of the remedial efforts.

In <u>summary</u> the <u>suggested monitoring consists of</u>: <u>condensate</u> <u>sampling at key locations where gas is purchased and sold</u>, and <u>at major condensate collection points along the transmission line</u>; <u>tracking the volume of condensate collected at these key locations</u>; and <u>limited gas stream sampling at major sales points</u>.

The Agency is aware that each company's situation is unique due to system design, system operation practices, PCB contamination situation, and remedial plans. However, because of the interrelation of the various companies involved, it is important for EPA to monitor the situation with data that is as uniform as possible. For these reasons, each company should adapt this monitoring plan to their individual situation, while still following the essential outline of this plan as closely as possible.

The details of this suggested monitoring program are explained below.

II. CONDENSATE SAMPLING

In order to closely track PCB contamination levels at certain key locations, <u>condensate samples</u> should be collected at the points outlined below.

1) The three locations on the contaminated portion of the system where the largest volume of gas is supplied to distribution companies. It is suggested that, in

addition to these three sales points, an additional sample be collected at one utility sales point in each state supplied by a contaminated portion of your system. One control sample should also be collected at a distribution supply location on a section of your system which is not contaminated.

- 2) Three points on the contaminated portion of the system where gas is supplied to other transmission companies.
- 3) Three condensate collection points within the contaminated portion of the system (excluding sales and interchange points) where large volumes of condensate are normally found.
- 4) Three locations where gas is purchased from another transmission company, particularly sites which are a potential source of PCBs entering your system.
- 5) One point where gas is received from an underground storage field on the contaminated portion of your system.
- 6) One location downstream and upstream of points where new equipment such as filter/separators, scrubbers, drips etc. are installed as part of your remedial effort.

 Additionally, condensate sampling should be conducted before and after other remedial steps such as pigging are carried out.

Reference to sampling locations, points, or sites refers to geographic location. If two or more lines operate in parallel at one of the geographic locations selected for sampling, each line should be sampled at that location.

| Sample
| If Commission |
| Sample = 1|
| coperate |
| sample = 1|
| coperate |
| sample = 1|

This sampling should begin in January 1982 and continue until March 1983. It is suggested that condensate samples should be collected monthly during periods of high flow volume and quarterly during periods of low flow. Suggested sampling dates are outlined in Part VI below. To facilitate analysis and discussion of the data, it is suggested that condensate sampling results should be reported in the format of Appendix I.

III. CONDENSATE REMOVAL

Those transmission companies with PCB contaminated lines are systematically removing contaminated pipeline liquids as part of their remedial programs. Each company should <u>submit information</u>, according to the schedule found in Part VI below, <u>showing the volume of PCB contaminated liquids collected during each reporting period</u>. It is suggested that this information be submitted in the format of Appendix II. Specifically the following information is requested:

- o The volume of condensate collected from those points chosen for monitoring in Part II above.
- o The total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 50 to 500 ppm (based on previous testing or tests on the specific liquids involved).
- o The total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 500 ppm or greater (based on previous testing or tests on the specific liquids involved).

This information will be used to assess the magnitude of the contamination and trends indicating improvement.

IV. GAS STREAM SAMPLING

Gas stream sampling should be conducted at the three major sales points selected for condensate sampling in Part II, number 1, above. One gas sample at each of these points should be collected in February 1982, June 1982, September 1982, and February 1983. These samples should be collected in conjunction with condensate samples. Gas stream samples should be collected using the June 1981. "Method to Measure PCBs in Natural Gas Pipelines", EPA 600/4-81-048 (method section pages A-1 through A-16). Questions concerning the technical aspects of gas stream sampling should be addressed to Michael Wood, PTSED, 202-472-3701, or Dr. William Mitchell, ORD, 919-541-2769. It is suggested that the gas sampling results be reported in the format of Appendix III.

These results will be used to determine the potential movement of PCBs in the gas stream under the present contamination situation and as the contamination levels are reduced.

v. QUALITY ASSURANCE - TECHNICAL ASSISTANCE

In order to determine the accuracy of sample analyses, the Agency will make available two 'check' samples of pipeline condensate containing a known quantity of PCBs for analysis by laboratories utilized during this program. These samples will be prepared and distributed by the National Enforcement Investigations Center (NEIC) in Denver, Colorado.

EPA will notify you prior to the check samples being sent to the laboratory. The laboratory will also be notified directly by NEIC prior to shipment of the samples. Questions and analytical results should be addressed directly to NEIC. NEIC will tabulate and analyze the results and provide this information to the individual laboratories and to EPA headquarters. EPA headquarters will inform each transmission company of the results for the laboratories they are using.

EPA will also provide technical assistance for questions relating to sample analyses. The EPA technical contact is Dean Hill of NEIC. Dean may be contacted at 303-234-3751. Requests for split analyses of problem samples should be referred directly to Mr. Hill.

VI. SUBMISSION OF INFORMATION -

Each company should <u>develop an initial report outlining</u> their <u>specific sampling plan</u>. This should include:

- A list of the exact location of the sampling sites including type of sampling point, i.e. a drip or scrubber, etc., and the category under which the point falls in Part II above.
- o A list of condensate collection points for reporting under Part III above, if condensate is not removed at the exact location where samples will be collected. This list would be needed, for example, in cases where the sampling point is a valve and the condensate from that portion of the line is removed at a drip three miles upstream.

- o A system map indicating the location of sampling points (Part II) and condensate collection points (Part III).
- o The name, address, and contact person at each laboratory used.

It is requested that this information be submitted to EPA by January 12, 1982.

It is also requested that <u>monitoring reports be submitted</u> according to the following schedule:

Report Date	For Samples Collected During
January 15, 1982	December 1981
April 15, 1982	Ja <u>nua</u> ry - March 1982
July 15, 1982	June 1982
October 15, 1982	September 1982
January 15, 1983	October - December 1982
April 15, 1983	January - March 1983
	•

It is suggested that monitoring reports should be submitted in the formats of Appendices I - III which are attached. The reports should be prefaced with a short summary of ongoing remedial activities and any problems or unique situations you feel the Agency should be aware of.

APPENDIX I - SUGGESTED FORMAT FOR REPORTING CONDENSATE SAMPLING RESULTS

COMPANY:

DATE OF REPORT:

		SAMPLING			,	ANAL YT I CAL		LABORATORY
LOCATION	CATEGORY*	DATE	NUMBER	VOLUME	RESULTS	AROCLOR	COMMENTS	USED
				(EXAMPLE			i
BOISE, ID	. 1	12/15/81	A-1	40 ml	104 ppm	1242	104% Recovery	Joe's Lab
BOISE, ID	1	1/11/82	A-2	50 ml	97 ppm	1242	97% Recovery	Smith Lab
XYZ, OR	4	12/10/81	A-3	100 ml	1,000 ppm	1221		Smith Lab
XYZ, OR	4	12/10/81	A - 4	100 m}	590 ppm	1242		Smith Lab
XYZ, OR	4	1/20/82	A-5	30 m1	890 ppm	1221	110% Recovery	Joe's Lab
XYZ. OR	4	1/20/81	A-6	50 ml	410 ppm	1242		Joe's Lab

^{*} CATEGORY - sampling site category from Part II.

APPENDIX II - SUGGESTED FORMAT FOR CONDENSATE COLLECTION REPORT

COMPANY:

DATE OF REPORT:

		DATE OF	VOLUME	PCB	DATE OF LAST	STORED DISPOSE
LOCATION	CATEGORY	COLLECTION	COLLECTED	CONCENTRATION	SAMPLE	AT AT
				EXAMPLE		
BOISE, ID DRIP LINE #3	1	12/15/81	200 gallons	104 ppm - 1242	12/15/81	LINCOLN, MO
BOISE, ID DRIP	1	1/20/82	130 gallons	97 ppm - 1242	1/11/81	LINCOLN, MO
XYZ, OR COMPRESS STATION LINE #12	OR 4	1/20/82	2;000 gallons	890 ppm - 1221	1/20/82	Incinerator
_XYZ, OR COMPRESSO LINE # 13	R 4	1/20/82	200 gallons	410 ppm - 1242	1/20/81	KY Incinerato

TOTAL LIQUIDS CONTAINING 50 TO 500 PPM PCBs REMOVED FROM PCB CONTAMINATED PORTION OF SYSTEM 12/81 - 1/82 :

15,000 gallons

TOTAL LIQUIDS CONTAINING 500 PPM OR GREATER PCBs REMOVED FROM PCB CONTAMINATED PORTION OF SYSTEM 12/81 - 1/82 :

5,000 gallons



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460

F. L. COHAGAN

OCT 1 1 1982

OCT 7 1982

OFFICE OF PESTICIDES AND TOXIC SUBSTANCES

Mr. F. L. Cohagan Vice President Texas Eastern Gas Pipeline Company P. O. Box 2521 Houston, TX 77001

Dear Mr. Cohagan:

As part of the remedial monitoring program for interstate natural gas pipeline cleanup activities, two PCB quality control check samples were sent to the laboratories identified in your remedial plan. The results of your laboratories' performance is enclosed.

This enclosure also includes a summary of results from all laboratories analyzing pipeline condensate under the remedial measures program. As is evident from this summary, there was a wide variation in results. This may be attributed to variations in analytical methods, quality control problems, and questions relating to interpretation of chromatograms. As levels of PCBs in the pipelines are reduced through remedial efforts, it is imperative that analytical results be as accurate as possible. Therefore, continued emphasis should be placed on quality assurance. To assist you in this effort, a Quality Assurance (QA) Program for remedial monitoring is enclosed. This QA document supercedes the February 1981 QA Program which had been distributed by EPA and INGAA. The revised QA Program should be implemented by your laboratory as soon as possible.

Quality control data specified in the QA Program, including results of reagent blanks, spiked recovery, and duplicates should be submitted along with your quarterly monitoring data. It is also recommended that the chromatograms and calculations be maintained for future reference should questions arise concerning the monitoring data.

If you have any questions concerning this information, please contact Michael Wood at 202-755-4650.

Sincerely yours,

A. E. Conroy II, Director Pesticides and Toxic Substances Enforcement Division

Enclosures

QUALITY ASSURANCE PROGRAM FOR LABORATORIES ANALYZING PIPELINE CONDENSATE AS PART OF THE EPA/NATURAL GAS INDUSTRY COOPERATIVE MONITORING PROGRAM

BACKGROUND

This document is a revision of the Quality Assurance Program distributed to companies which participated in the initial monitoring of natural gas pipeline condensate to determine the extent and magnitude of PCB contamination. The previous guidelines were distributed to interstate transmission companies in February 1981, by EPA and INGAA. Recent results from the analysis of two EPA check samples supplied to laboratories used during the remedial measures monitoring program indicate the need for a continued emphasis on quality control by transmission companies and their laboratories. This revised QA program encompasses four features:

- (1) Analytical methodology method validation
- (2) Individual laboratory QA programs
- (3) On-going QC for sample analysis
- (4) Technical assistance

ANALYTICAL METHODOLOGY - METHOD VALIDATION

EPA has supplied a method of analysis for use in analyzing pipeline condensate for PCBs. This method has proven successful for the identification and quantification of PCBs in a wide variety of pipeline condensates. The results from the recent EPA check sample program show that a wide variety of methodologies is currently being employed by laboratories now analyzing samples for gas transmission companies. In order to obtain comparable and useful results, the suggested method, "The Analysis of Polychlorinated Biphenyls in Transformer Fluid and Waste Oils", should be used for analysis of condensate samples. Use of this method, employing one or more of the cleanup steps contained in the method along with the additional sulfur cleanup step* as appropriate, will provide the transmission companies and EPA with the most accurate and precise results possible.

^{*} Sulfur clean up step developed by NEIC for this program.

The suggested method is restricted to use by, or under the supervision of, analysts experienced in the use of gas chromatography and in the interpretation of gas chromatograms (method section 1.3). Each analyst must also demonstrate the ability to generate acceptable results with this method by complying with the method quality control program found in section 10 of the method. Transmission companies should assure themselves that their laboratory complies with this requirement. Information on laboratory performance of these required steps should be included in reports of analyses received from the laboratory.

Except in rare instances, the suggested analytical method should be utilized. If a company or laboratory employs an alternate method of analysis, the alternate method must be validated. Information on validation requirements is available from EPA's National Enforcement Investigations Center Laboratory (see technical assistance below).

INDIVIDUAL LABORATORY QA PROGRAMS

As mentioned above, laboratories should perform the minimal QA program <u>detailed in section 10</u> of the analytical method. Transmission companies should also be provided with individual laboratory QA programs informing them of the laboratory's standard QA procedures. If this information is not in writing, the transmission company should, at a minimum, have their chemists discuss the laboratory's QA program with the laboratory in question. Items covered in written QA plans or discussions with the laboratory should include:

- o A description of how samples and standards are received, transferred, and stored.
- o A description of instrument operation, calibration, and maintenance.
- o A description of preparation procedures for reagents, standards, and samples.
- o A description of analytical QC procedures used in day to day operation.

- o A description of the means used to minimize contamination of low level (less than 50 ppm) PCB samples from high level samples.
- o A description of how the above mentioned activities are supervised and monitored as to their performance within the laboratory.

ON GOING QC FOR SAMPLE ANALYSIS

HAS NET CALL

Fair DIN TE

LIGUIUS

The following represents the minimum QC steps to be taken for each batch of samples analyzed. These requirements correspond or exceed those required by section 10 of the analytical method.

- 1. A true duplicate (separate sample weighings) will be performed for at least one of every 20 samples or once per each batch if there are fewer than 20 samples in a batch.
- 2. Reagent blanks should be performed for at least each batch of samples analyzed or whenever a new container of reagent or solvent is utilized.
- 3. At least twenty percent of all samples should be spiked with the equivalent amount of PCBs quantified in the sample, and rechromatographed to demonstrate no loss of PCBs due to matrix effects or faulty chromatography. If some of the samples chosen for spiking show no detectable PCBs, they should be spiked with 10 ppm of Aroclor 1242 and 1260 respectively. Except for non-uniform samples, the acceptable range for percent recovery is 80 to 120 percent.
- 4. Linearity of standard response should be established_at least daily for PCBs of interest (Aroclor 1242 and 1260). Standard response values should always bracket sample response.

QC reults for numbers 1 through 3 above should be reported with associated sample results. All chromatograms, calculations, and quality control data should also be maintained by the company or laboratory for future reference should questions concerning the validity of the data arise.



TECHNICAL ASSISTANCE

Technical assistance for questions relating to sample analysis, methodology, validation of alternate analytical methods, and quality control is available from EPA. EPA's technical contact is Dean Hill of the National Enforcement Investigations Center (NEIC), telephone 303 - 234 - 4661.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460

F. L COHAGAN

JUN 6 1983

OFFICE OF PESTICIDES AND TOXIC SUBSTANCES

Mr. F. L. Cohagan Vice President Texas Eastern Gas Pipeline Company Post Office Box 2521 Houston, Texas 77701

Dear Mr. Cohagan:

Over the past two years, your company has participated in the remedial program to reduce levels of PCBs present in your gas transmission pipelines. As part of this program, quarterly monitoring has been conducted to determine if PCB levels have been reduced in your system through removal of pipeline liquids and other remedial measures.

A review of your quarterly monitoring data indicates that your system continues to contain regulated levels of PCBs. Therefore, the Agency requests that you continue your monitoring efforts. However, you need submit data only semi-annually. Monitoring reports should be submitted on October 30th for the months of April through September and on April 30th for the months of October through March.

Monitoring and reporting under this program will continue until levels of PCBs in your system consistently remain below 50 parts per million. EPA will evaluate reports as they are received, and notify you when the determination is made that additional reporting is no longer required.

Your efforts over the past two years demonstrated how the public interest can be served by cooperation between industry and the government. The Agency would like to thank you for your past participation and continued cooperation. If you have any questions, please contact Mr. John S. Seitz, of my staff at 202-382-7835.

Sincerely yours,

A. E. Conroy II, Director Compliance Monitoring Staff

Office of Pesticides and Toxic Substances

APPENDIX III - SUGGESTED FORMAT FOR GAS SAMPLING RESULTS

COMPANY:

SAMPLING LOCATION:

DATE OF SAMPLING:

SAMPLE NUMBER:

SAMPLE VOLUME:

In liters of gas

ANALYTICAL

RESULT:

As ug/M^3 or ng/M^3

LIMIT OF DETECTION:

COMMENTS:

BLANK RESULT:

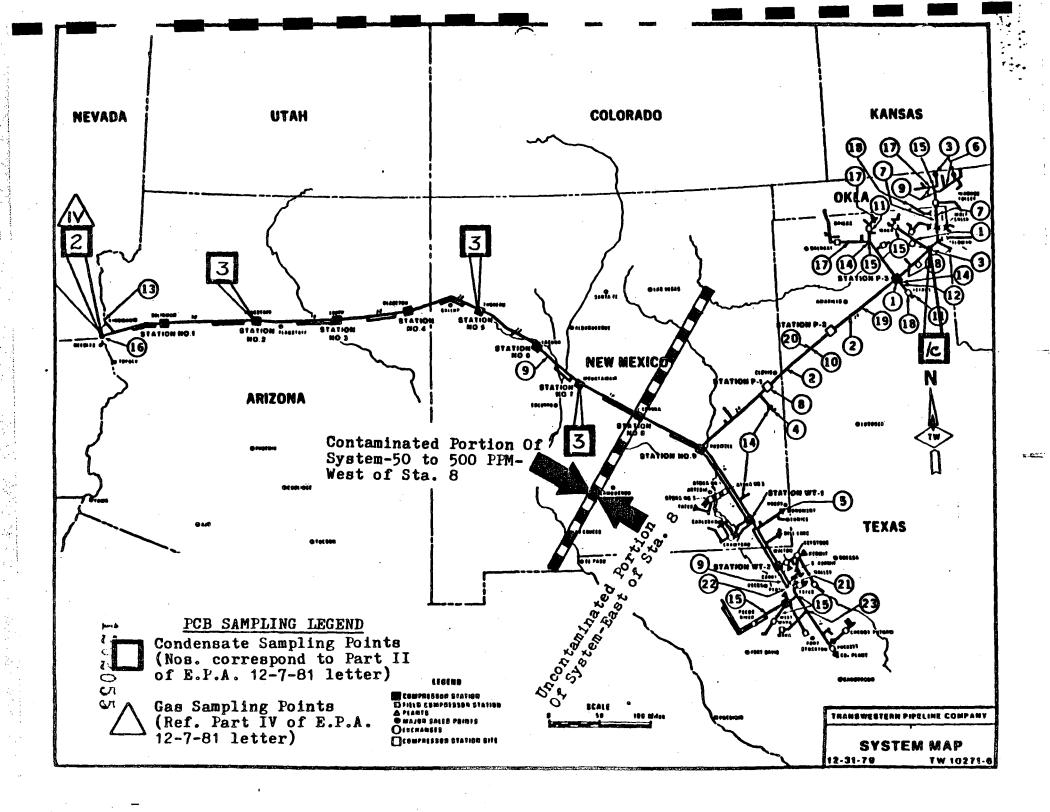
ASSOCIATED CONDENSATE SAMPLING RESULT:

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

2. Monitoring reports to be submitted as follows: For Samples

Report Date	Collected During
January 15, 1982 April 15, 1982 July 15, 1982 October 15, 1982 January 15, 1983 April 15, 1983	December, 1981 January-March, 1982 June, 1982 September, 1982 October-December, 1982 January-March, 1983

ACTION PROPOSED: Because of the timing of the receipt of the EPA letter and the time needed to develop and implement the monitoring plan, it is proposed that sampling will commence with the January-March, 1982 sampling period, reportable April 15, 1982.



TEXAS () EASTERN

Gas Pipeline Company

A DIVISION OF TEXAS EASTERN TRANSMISSION CORPORATION

F. L. COHAGAN VICE PRESIDENT

January 21, 1982

Mr. John S. Seitz (En-342) Environmental Protection Agency 401 M Street S.W. Washington, D.C. 20460

Dear Mr. Seitz:

A monitoring plan for PCB contamination has been developed for the Texas Eastern Gas Pipeline Company and Transwestern Pipeline Company systems in accordance with Mr. A. E. Conroy II's letter dated December 7, 1981. In accordance with Item VI of Mr. Conroy's letter, attached as our initial report is a copy of the individual plans. For reference purposes, the numbering sequence of the plans follow the format and correspond to those contained in Mr. Conroy's letter.

Please advise should you have any questions or should any part of the plans not meet with your approval.

Sincerely,

F. L. Cohagan

FLC: 1k Attachments

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-7-81)

I. BACKGROUND

II. CONDENSATE SAMPLING

1. (a) Three locations on the contaminated portion of the system where the largest volume of gas is supplied to distribution companies.

RESPONSE: No gas is supplied directly to a distribution company from the contaminated portion of the system. (Reference Part II Item 2).

(b) One utility sales point in each state supplied by a contaminated portion of your system.

RESPONSE: No utility sales points are supplied with gas in the states traversed by the contaminated portion of the system.

(c) One distribution supply location on a section of system which is not contaminated.

LOCATION SELECTION: Cities Service - Canadian sales point, Hemphill County, Texas.

2. Three points on the contaminated portion of the system where gas is supplied to other transmission companies.

LOCATION SELECTION: The only point on the contaminated portion of the system where gas is supplied to another transmission company is to Pacific Lighting Service Company at Needles, Mohave County, Arizona.

3. Three consendate collection points within the contaminated portion of the system (excluding sales and interchange points) where large yolumes of condensate are normally found.

LOCATION SELECTIONS:

	Collection Location	Sampling Point
(1)	Compressor Station No. 2	Scrubber Pit
	Flagstaff, Arizona	
(2)	Compressor Station No. 5	Scrubber Pit
• •	Thoreau, New Mexico	· -
(3)	Compressor Station No. 7	Scrubber Pit
• •	Mountainair, New Mexixo	

4. Three locations where gas is purchased from another transmission company.

<u>RESPONSE:</u> Gas is not normally purchased from another transmission company anywhere on the contaminated portion of the system.

5. One point where gas is received from an underground storage field on the contaminated portion of the system.

<u>RESPONSE</u>: Gas is not received from an underground storage field anywhere on the contaminated portion of the system.

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

6. (a) One location downstream and upstream of points where new equipment such as filter/separators, scrubbers, drips, etc. are installed as part of remedial effort.

RESPONSE: Not applicable at this time.

(b) Condensate sampling before and after other remedial steps such as pigging are carried out.

ACTION PROPOSED: Pipeline samples will be taken before and after pigging performed for PCB cleanup purposes.

III. CONDENSATE REMOVAL

1. Volume of condensate collected from those points chosen for monitoring in Part II above.

ACTION PROPOSED: Accumulate information on condensate collected at the following locations

a. Cities Service - Canadian, Hemphill County, Texas

- b. Pacific Lighting Service Company, Needles, Mohave County, Arizona
- c. Compressor Station No. 2, Flagstaff, Arizona
- d. Compressor Station No. 5, Thoreau, New Mexico
- e. Compressor Station No. 7, Mountainair, New Mexico
- 2. Total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 50 to 500 PPM.

ACTION PROPOSED: Accumulate quantities of condensate collected in the system from Compressor Station No. 8 - Corona, New Mexico to Pacific Lighting sales point at Needles, Arizona.

3. Total volume of condensate collected from the contaminated portion of the system having a PCB concentration of 500 PPM or greater.

RESPONSE: PCB concentrations in the contaminated portion of the system do not normally run above 500 PPM.

IV. GAS STREAM SAMPLING

Gas stream sampling to be conducted in conjunction with condensate samples at the major sales points selected for condensate sampling (Part II, No. 1 above) using the June, 1981 "Method to Measure PCBs in Natural Gas Pipelines," EPA 600/4-81-048 (method section pages A-1 thru A-16). One gas sample to be collected at each of the three points as follows:

(1) February, 1982

1202053

(2) June, 1982

(3) September, 1982

(4) February, 1983

<u>RESPONSE</u>: No major sales points are designated for condensate sampling under Part II, No. 1 above. However, one gas sample will be collected at

TRANSWESTERN PIPELINE COMPANY PCB REMEDIAL MONITORING PROGRAM (REFERENCE EPA LETTER OF 12-4-81)

the Pacific Lighting sales point at Needles, Arizona in accordance with the above schedule.

V. QUALITY ASSURANCE - TECHNICAL ASSISTANCE

EPA is to make available two "check" samples of pipeline condensate containing a known quantity of PCBs for analysis by laboratories utilized during this program.

ACTION PROPOSED: Labs to be used are as follows:

- (1) Primary Lab-Texas Eastern Analytical Laboratory Texas Eastern Gas Pipeline Company P. O. Box 2521 Houston, Texas 77001 Attention: Mr. Douglas Dodds
- (2) Alternate Lab
 Southern Patroleum Laboratories Inc.
 8880 Interchange
 P. O. Box 20807
 Houston, Texas 77054
 Attention: Mr. Sammy Russo

IV. SUBMISSION OF INFORMATION

- 1. An initial report is required to be submitted to EPA by January 12, 1982 to include:
 - (a) List of exact location of sampling sites including type of sampling point (scrubber, drip, etc.) and category under which the point falls in Part II above.

RESPONSE: See information furnished for Part II above. Condensate samples will be collected at meter station facilities, except as otherwise noted.

(b) A list of condensate collection points for reporting under Part III above if condensate is not removed at the exact location where samples will be collected.

RESPONSE: It is proposed that all condensate collected for reporting under Part III will be collected at the facility location.

(c) A system map indicating the location of sampling points (Part II) and condensate collection points (Part III).

RESPONSE: See attached system map.

1202059

(d) The name, address, and contact person at each laboratory used.

RESPONSE: Reference Part V above.

Attachment 7.2
Annual PCB Documents

GAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

	DATE	DATE PLACED INTO	TOTAL WEIGHT		
ORIGIN	REMOVED FROM SERVICE	TRANSPORT FOR DISPOSAL OR STORAGE	IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY
ORONA, N.M.		07/24/81 07/24/81	16,628 16,885	Pipeline Liquid	CWM, Emille, AL
LAGSTAFF, AR		08/12/81 07/17/81	12,840 16,050	Pipeline Liquid	Rollins, Deer Pk, TX
AGETOH, AZ	:	07/08/81 08/13/81 08/20/81	16,050 16,050 16,050	Pipeline Liquid " " .	CWM, Emille, AL
LEUPP, AZ		07/08/81	11,993	Pipeline Liquid	Rollins, Deer Pk, TX
DUNTAINAIR, N	4	06/08/81 06/23/81 07/07/81	16,050 16,050 16,885	Pipeline Liquid	CWM, Emille, AL
OREAU		06/17/81 07/17/81	16,050 11,235	Pipeline Liquid	CWM, Emille, AL

GAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

ORIGIN	DATE REMOVED FROM SERVICE	INTO TRANSPORT FOR DISPOSAL OR STORAGE	WEIGHT IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY	
LAGSTAFF, AR	<u> </u>	08/12/81 07/17/81	12,840	ب سنون فراه می این استانی به این این این این این این این این این این	Rollins, Deer Pk, TX	

GAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

ORIGIN	DATE REMOVED FROM SERVICE	INTO TRANSPORT FOR DISPOSAL OR STORAGE	TOTAL WEIGHT IN KILOGRAMS	IDENIIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY
LEUPP, AZ.		7/8/81	11,983	Pipeline Liquid	Rollins, Deer Pk, TX

DATE PLACED

CAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

RIGIN	DATE REMOVED FROM SERVICE	DATE PLACED INTO TRANSPORT FOR DISPOSAL OR STORAGE	TOTAL WEIGHT IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY	
LAGETOH, AZ.		7/08/81 8/13/81 8/20/81	16,050 16,050 16,050	Pipeline Liquid	CWM,Emille, AL.	

GAS WEST SYSTEM - ROSWELL AREA PCB STURAGE AND DISPOSAL DATA CALENDAR YEAR 1981

ORIGIN	REMOVED FROM SERVICE	TRANSPORT FOR DISPOSAL OR STORAGE	TOTAL WEIGHT IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY	
THOREAU		6/17/81 7/17/81	16,050 11,235	Pipeline Liquids	CMM, Emille, AL	

GAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

ORIGIN	DATE REMOVED FROM SERVICE	INTO TRANSPORT FOR DISPOSAL OR STORAGE	WEIGHT IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY
MOUNTAINAIR, NN	1	06/08/81 06/23/81 07/07/81	16,050 16,050 16,885	Pipeline Liquids	CWM, Emille, AL

GAS WEST SYSTEM - ROSWELL AREA PCB STORAGE AND DISPOSAL DATA CALENDAR YEAR 1981

<u> </u>	DATE	DATE PLACED INTO	TOTAL WEIGHT		OUNTR & LOCATION
ORIGIN	REMOVED FROM SERVICE	TRANSPORT FOR DISPOSAL OR STORAGE	IN KILOGRAMS	IDENTIFICATION	OWNER & LOCATION OF DISPOSAL OR STORAGE FACILITY
ORONA, NM		07/24/81 07/24/81	16,628 16,885	Pipeline Liquids	CWM1, Emille, AL

CONDENSATE COLLECTION REPORT

(Reference EPA Letter 12/7/81)

DATE OF REPORT July 1, 1982 FOR PERIOD April 1, 1982 TO July 1, 1982 Date of Volume PCB Date of Location Collection Collected Concentration Liquid Stored Liquid Disposed of By Last Sample Cities Service - Canadian LT 1 6-29-82 Canadian, TX 4-1-82 73206 gals. Pacific Lighting - Needles 6-30-82. 233 gals. 6-14-82 Needles, AZ Flagstaff Compressor Sta. 6-30-82 7400 gals. 6-15-82 Flagstaff, AZ 6-28-82 Thoreau, NM Thoreau Compressor Sta. 6-30-82 9625 gals. 158 Mountainair, NM 38 Mountainair Compressor Sta. 6-30-82 19420 gals. 5-21-80

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 36,678 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system -0-.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

July 15, 1982

	Sampling				
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location on a	section of system which is not	contaminated)			
Hemphill County, Texas	Cities Service - Canadian	6-29-82	464	1	
(Point on contaminated portion of	the system where gas is supplied	to another tra	nsmission com	pany)	,
Needles, Arizona	Pacific Lighting	6-14-82	440	. 89	
(Collection point within the contact	minated portion of system where	large volumes o	f condensate	are normally found)	
Flagstaff, Arizona	Compressor Sta. #2	6-15-82	428	90	
Thoreau, New Mexico	Compressor Sta. #5	6-28-82	450	158	
Mountainair, New Mexico	Compressor Sta. #7	5-21-82	368	38	

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242

CONDENSATE COLLECTION REPORT (Reference EPA Letter 12/7/81)

DATE OF REPORT April 1, 1982

FOR PERIOD <u>January 1, 1982</u> TO <u>April 1, 1982</u>

Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored Liquid Disposed of By
Cities Service - Canadian	04-01-82	1519 gals.	1	03-22-82	Canadian, TX
Pacific Lighting - Needles	04-01-82	77 gals.	53	02-17-82	Needles, AZ
Flagstaff Compressor Sta.	04-01-82	1047 gals.	317	02-17-82	Flagstaff, AZ
Thoreau Compressor Sta.	04-01-82	6812 gals.	142	02-17-82	Thoreau, NM
Mountainair Compressor Sta.	04-01-82	5205 gals.	12	02-19-82	Mountainair, NM

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 7936 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system -0-

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

April 15, 1982

Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location	on a section of system which is	s not contami	nated)		
Hemphill County, Texas	Cities Service - Canadian	03-22-82	271	1	
(Point on contaminated portion Needles, Arizona	Pacific Lighting	02-17-82	162	53	
(Collection point within the co	ontaminated portion of system w	mere large v	olumes of conde	nsate are normally found)	
Flagstaff, Arizona	Compressor Sta. #2	02-17-82	111	317	
Thoreau, New Mexico	Compressor Sta. #5	02-17-82	84	142	
Mountainair, New Mexico	Compressor Sta. #7	02-19-82	85	12	
					· ·

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242

GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

July 15, 1982

	•
SAMPLING LOCATION	Pacific Lighting
DATE OF SAMPLING	6-8-82
SAMPLE NUMBER	82-P - 466
SAMPLE VOLUME	50 liters
ANALYTICAL RESULT	16.3 ug/m^3
LIMIT OF DETECTION	0.2 ug/m ³
COMMENTS	•
BLANK RESULT	44 ng
ASSOCIATED CONDENSATE	
SAMPLING RESULT	89 ppm

GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

April 15, 1982

SAMPLING LOCATION:

Pacific Lighting

DATE OF SAMPLING:

03-15-82

SAMPLE NUMBER:

82P - 246

SAMPLE VOLUME:

50 liters

ANALYTICAL RESULT:

6.2 ug/m³

LIMIT OF DETECTION:

 0.2 ug/m^3

COMMENTS:

BLANK RESULT:

80 ng

ASSOCIATED CONDENSATE SAMPLING RESULT:

53 ppm

TRANSWESTERN PIPELINE COMPANY CONDENSATE COLLECTION REPORT

(Reference EPA Letter 12/7/81)

DATE	OF	REPORT	January	15,	1983

FOR PERIOD October 1, 1982 - January 1, 1983

Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored	Liquid Disposed of By
Cities Service - Canadian	12-31-82	25,119 gals.	LT 1	12-27-82	Canadian, TX	
Pacific Lighting - Needles	12-31-82	7 gals.	85	12-02-82	Needles, AZ	
Flagstaff Compressor Sta.	12-31-82	595 gals.	236	12-02-82	Flagstaff, AZ	·
Thoreau Compressor Sta.	12-31-82	7,656 gals.	482	12-22-82	Thoreau, NM	
Mountainair Compressor Sta.	12-31-82	1,231 gals.	27	10-22-82	Mountainair, NM	

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 9,489 gals.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

January 15, 1983

Location	Station Name	Sampl Date	ing <u>Number</u>	Results (PPM)*	Comments
(Distribution supply location	on a section of system which is not	contaminated)	• `		
Hemphill County, Texas	Cities Service - Canadian	12-27-82	005	LT 1	
(Point on contaminated portion	of the system where gas is supplie	ed to another trai	nsmission compa	uny)	
Needles, Arizona	Pacific Lighting	12-02-82	918	85	
(Collection point within the c	ontaminated portion of system where	large volumes of	condensate ar	•	•
Flagstaff, Arizona	Compressor Sta. #2	12-02-82	919	236	
Thoreau, New Mexico	Compressor Sta. #5	12-22-82	917	482	
Mountainair, New Mexico	Compressor Sta. #7	10-22-82	813	27	-

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242

GAS SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

January 15, 1983

SAMPLING LOCATION

DATE OF SAMPLING

SAMPLE NUMBER

SAMPLE VOLUME

ANALYTICAL RESULT

LIMIT OF DETECTION

COMMENTS

BLANK RESULT

ASSOCIATED CONDENSATE SAMPLING RESULT

Pacific Lighting

12-22-82

83P - 019

50 liters

None detected

0.2 ug/m³

None detected

85 ppm

CONDENSATE COLLECTION REPORT

(Reference EPA Letter 12/7/81)

DATE OF REPORT April 1, 1983

FOR PERIOD January 1, 1983 - April 1, 1983

Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored Liquid Disposed of By
Cities Service - Canadian	3-31-83	71,232 gals.	LT 1	3-2-83	Canadian, TX
Pacific Lighting - Needles	3-31-83	35 gals.	84	3-1-83	Needles, AZ
Flagstaff Compressor Sta.	3-31-83	6,884 gals.	23	3-1-83	Flagstaff, A2
Thoreau Compressor Sta.	3-31-83	2,965 gals.	154	2-15-83	Thoreau, M
Mountainair Compressor Sta.	3-31-83	1,873 gals.	26	3-15-83	Mountainair, NM

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 3,000 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system -0- gals.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

April 15, 1983

		Samp]	ing		
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location	on a section of system which is not	contaminated)	•		
Hemphill County, Texas	Cities Service - Canadian	3-2-83	291	LT 1	
(Point on contaminated portion	of the system where gas is supplied	to another tra	nsmission compa	uny)	
Needles, Arizona	Pacific Lighting	3-1-83	289	84	
(Collection point within the co	ontaminated portion of system where	large volumes o	f condensate ar	re normally found)	
Flagstaff, Arizona	Compressor Sta. #2	3-1-83	288	23	
Thoreau, New Mexico	Compressor Sta. #5	2-15-83	213	154	
Mountainair, New Mexico	Compressor Sta. #7	3-15-83	323	26	

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242

TRANSWESTERN PIPELINE COMPANY GAS SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

April 15, 1983

SAMPLING LOCATION

DATE OF SAMPLING

SAMPLE NUMBER

SAMPLE VOLUME

ANALYTICAL RESULT

LIMIT OF DETECTION

COMMENTS

BLANK RESULT

ASSOCIATED CONDENSATE SAMPLING RESULT

Pacific Lighting

2-07-83

83P-238

50 liters

None detected

 0.2 ug/m^3

None detected

84 ppm

TRANSWESTERN PIPELINE COMPANY MONITORING CONDENSATE SAMPLING RESULTS (Reference EPA Letter 12/7/81)

Period April 1, 1983 - September 30, 1983

. Translan	Shahdan Nama	Samp1:	•		Comments
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location of	on a section of system which is not	contaminated)		•	
Hemphill County, Texas	Cities Service - Canadian	9-02-83	901	LT 1	
(Point on contaminated portion	of the system where gas is supplied	to another tran	nsmission compa	ny)	
Needles, Arizona	Pacific Lighting	9-01-83	794	48	Filter/separator installed upstream
		ಸು			. •
(Collection point within the co	ontaminated portion of system where	large volumes of	condensate are	e normally found)	
Flagstaff, Arizona	Compressor Sta. #2	9-29-83	902	LT 1	
Thoreau, New Mexico	Compressor Sta. #5	9-21-83	876	21	
Mountainair, New Mexico	Compressor Sta. #7	9-20-83	793	· 38	

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242

TRANSWESTERN PIPELINE COMPANY GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

Period April 1, 1983 - September 30, 1983

SAMPLING LOCATION

DATE OF SAMPLING

SAMPLE NUMBER

SAMPLE VOLUME

ANALYTICAL RESULT

LIMIT OF DETECTION

COMMENTS

BLANK RESULT

ASSOCIATED CONDENSATE

SAMPLING RESULT

· . Pacific Lighting

9-22-83

83P-924

50 Liters

21.7 ug/m³

 0.2 ug/m^3

Dual Column Confirmation

None detected

48 ppm

1202082

TRANSWESTERN PIPELINE COMPANY CONDENSATE COLLECTION REPORT (Reference EPA Letter 12/7/81)

DATE OF REPORT	· · · · · · · · · · · · · · · · · · ·			FOR PER	IOD <u>April 1, 198</u>	33 to September 30, 1983
Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored	Liquid Disposed of By
Cities Service - Canadian	9-30-83	61,488 gals	LT 1	9-02-83	Canadian, TX	
Pacific Lighting - Needles	9-30-83	2112 gals	48	9-01-83	Needles, AZ	
Flagstaff Compressor Sta.	9-30-83	9726 gals	LT 1	9-29-83	Flagstaff, AZ	•
Thoreau Compressor Sta.	9-30-83	4704 gals	21 .	9-21-83	Thoreau, NM	
Mountainair Compressor Sta.	9-30-83	6674 0010	38	9-20-83	Mountainair NM	

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system _______ gals

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system _______ op__ gals

TRANSWESTERN PIPELINE COMPANY CONDENSATE COLLECTION REPORT (Reference EPA Letter 12/7/81)

DATE OF REPORT April 30, 19	984	FOR FERIOD October 1, 1983 - March 31, 1984			
Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored Liquid Disposed of By
Cities Service - Canadian	3-31-84	213,276 gals.	LT 1	3-05-84	Canadian, TX
Pacific Lighting - Needles	3-31-84	190 gals.	92	3-01-84	Needles, AZ
Flagstaff Compressor Sta.	3-31-84	1540 gals.	LT 1	3-01-84	Flagataff, AZ
Thoreau Compressor Sta.	3-31-84	3718 gals.	LT 1	2-02-84	Thoreau, NM
Mountainair Compressor Sta.	3-31-84	5497 gals.	55	2-03-84	Mountainair, NM

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 5687 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system 0 gals.

MONITORING CONDENSATE SAMPLING RESULTS

(Keference EPA Letter 12/7/81)

Period: October 1, 1983 - March 31, 1984

		Samp 1	ing		
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location on a	section of system which is not co	ontaminated)	·		
Hemphill County, Texas	Cities Service - Canadian	3-05-84	434	LT 1	
(Point on contaminated portion of	the system where gas is supplied 0	to another tra	nsmission compar	ny)	:
Needles, Arizona	Pacific Lighting	3-01-84	342	92	
(Collection point within the conta	minated portion of system where la	arge volumes o	f condensate are	e normally found)	
Flagstaff, Arizona	Compressor Sta. #2	3-01-84	343	LT 1	
Thoreau, New Mexico	Compressor Sta. #5	2-02-84	217	LT 1	
Mountainair, New Mexico	Compressor Sta. #7	2-03-84	329	·. 55	
(Locations downstream and upstream	of point where new filter/separat	or has been ad	lded.)	•	
Compressor Station #1 - Seligman,	AZ - Filter Separator			•	
Upstream	Compressor Station #2	3-01-84	343	LT 1	
Downstream	Pacific Lighting - Needles, AZ	3-01-84	342	92	

^{*}Analysis - Texas Eastern Analytical Laboratory
Analytical Aroclor 1242

TRANSWESTERN PIPELINE COMPANY GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

Period: October 1, 1983 - March 31, 1984

SAMPLING LOCATION Pacific Lighting

DATE OF SAMPLING 3-05-84

SAMPLE NUMBER 84P-458

SAMPLE VOLUME 50 Liters

ANALYTICAL RESULT 16.0 ug/m³

LIMIT OF DETECTION 0.5 ug/m³

COMMENTS

BLANK RESULT None detected

ASSOCIATED CONDENSATE

SAMPLING RESULT 92 ppm

1202086

TRANSWESTERN PIPELINE COMPANY CONDENSATE COLLECTION REPORT (Reference EPA Letter 12/7/81)

DATE OF REPORT October 31, 1984

FOR PERIOD April 1, 1984 - September 30, 1984

Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored Liquid Disposed of By
Cities Service - Canadian	9-30-84	980 gals.	LT 1	9-04-84	Canadian, TX
Pacific Lighting - Needles	9-30-84	26 gals.	48	9-01-84	Needles, AZ
Flagstaff Compressor Sta.	9-30-84	2452 gals.	235	9-05-84	Flagstaff, AZ
Thoreau Compressor Sta.	9-30-84	4437 gals.	436	9-06-84	Thoreau, NM
Mountainair Compressor Sta.	9-30-84	2662 gals.	LT 1	9-14-84	Mountanair, NM

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 6889 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system -0- gals.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

Period: April 1, 1984 - September 30, 1984

		Sampl	ing	-	
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location	on a section of system which is not co	ntaminated)			
Hemphill County, Texas	Cities Service - Canadian	9-04-84	1022	LT 1	
(Point on contaminated portion	n of the system where gas is supplied t	o another tra	nsmission compa	· ny)	
Needles, Arizona	Pacific Lighting	9-01-84	1059	48	
(Collection point within the c	contaminated portion of system where la	rge volumes o	f condensate are	e normally found)	
Flagstaff, Arizona	Compressor Sta. #2	9-05-34	1062	235	
Thoreau, New Mexico	Compressor Sta. #5	9-06-84	962	436	
Mountainair, New Mexico	Compressor Sta. #7	9-14-84	1061	LT 1	
(Locations downstream and upst	tream of point where new filter/separat	or has been a	dded.)	·	
Compressor Station #1 - Selign	nan, AZ - Filter Separator				
Upstream	Compressor Station #2	9-05-84	1062	235	
Downstream	Pacific Lighting - Needles, AZ	9-01-84	1059	48	

^{*}Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242, 1248, 1254, 1260

TRANSWESTERN PIPELINE COMPANY GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

Period: April 1, 1984 - September 30, 1984

SAMPLING LOCATION

Pacific Lighting

DATE OF SAMPLING

9-07-84

SAMPLE NUMBER

1152

SAMPLE VOLUME

50 Liters

ANALYTICAL RESULT

16.6 ug/m³

1.0 ug/m³

LIMIT OF DETECTION

BLANK RESULT

COMMENTS

None detected

ASSOCIATED CONDENSATE

SAMPLING RESULT

48 ppm

TRANSWESTERN PIPELINE COMPANY CONDENSATE COLLECTION REPORT (Reference EPA Letter 12/7/81)

DATE OF REPORT April 30, 1985				FOR PERIOD <u>October 1, 1986 - March 31, 1985</u>		
Location	Date of Collection	Volume Collected	PCB Concentration	Date of Last Sample	Liquid Stored Liquid Disposed of By	
Cities Service - Canadian	3-31-85	4228 gals	LT 2	3-04-85	Canadian, TX	
Pacific Lighting - Needles	3-31-85	· 31 gals	125	3-26-85	Needles, AZ	
Flagataff Compressor Sta.	3-31-85	7673 gals	LT 2	2-20-85	Flagstaff, AZ	
Thoreau Compressor Sta.	3-31-85	10,610 gals	929	1-29-85	Thoreau, NM	
Mountainair Compressor Sta.	3-31-85	3859 gals	57	2-14-85	Mountainair, NM	

Total liquids containing 50 PPM to 500 PPM PCBs removed from PCB affected portion of system 3890 gals.

Total liquids containing 500 PPM or greater PCBs removed from PCB affected portion of system 10,610 gals.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

Period: October 1, 1984 - March 31, 1985

	•	Samp1	ing		
Location	Station Name	Date	Number	Results (PPM)*	Comments
(Distribution supply location on	a section of system which is not con	ntaminated)	•		
Hemphill County, Texas	Cities Service - Canadian	3-04-85	612	LT 2	
(Point on contaminated portion o	f the system where gas is supplied to	another tra	nsmission compan	y)	
Needles, Arizona	Pacific Lighting	3-26-85	524	125	
(Collection point within the cont	taminated portion of system where las	rge volumes o	f condensate are	normally found)	
Flagstaff, Arizona	Compressor Sta. #2	2-20-85	374	LT 2	
Thoreau, New Mexico	Compressor Sta. #5	1-29-85	226	929	
Hountaineir, New Mexico $\sqrt{}$	Compressor Sta. #7	2-14-85	223	57	
(Locations downstream and upstream	am of point where new filter/separato	r has been a	dded.)		
Compressor Station #1 - Seligman	, AZ - Filter Separator	•	•		
Upstream	Compressor Station #2	2-20-85	374	LT 2	
Downstream	Pacific Lighting - Needles, AZ	3-26-85	524	125	

*Analysis - Texas Eastern Analytical Laboratory Analytical Aroclor 1242, 1248, 1254, 1260

TRANSWESTERN PIPELINE COMPANY GAS SAMPLING RESULTS (Reference EPA Letter 12/7/81)

Period: October 1, 1984 - March 31, 1985

SAMPLING LOCATION

Pacific Lighting

DATE OF SAMPLING

3-04-85

SAMPLE NUMBER

518

SAMPLE VOLUME

50 Liters

ANALYTICAL RESULT

None detected

LIMIT OF DETECTION

 2.0 ug/m^3

COMMENTS

BLANK RESULT

None detected

ASSOCIATED CONDENSATE

SAMPLING RESULT

125 ppm

CONDENSATE COLLECTION REPORT

(Reference EPA Letter 12/7/81)

DATE OF REPORT October 30, 1985

For Period April 1, 1985 - September 30, 1985

Location	Date Of Collection	Volume Collected	PCB Concentration	Date Of Last Sample	Liquid Stored At Liquid Disposed of By
Cities Service - Canadian	9-30-85	1857 gal.	LT 2	9-11-85	Canadian, TX
Pacific Lightin - Needles	9-30-85	144 gal.	165	9-19-85	Needles, AZ
Flagstaff Compressor Sta.	9-30-85	1044 gal.	*	•	Flagstaff, AZ
Luepp Compressor Sta.	9-30-8 5	10 gal.	563-	~9=19=8 5	Leupp, AZ
Thoreau Compressor Sta.	9-30-85	1751 gal.	*		Thoreau, NM
Mountainaire, NM	9-30-85	3850 gal.	193	9-19-85	Mountainaire, NM

Total Liquids containing 50 PPM to 500PPM PCBS removed from contaminated portion of system 8,486 gallons

Total liquids containing 500PPM or greater PCBs removed from containinated portion of system 14,020 gallons

^{*} Results obtained from commercial laboratory on these two locations were not valid due to improper sulfur removal procedure during sample clean-up. The Transwestern laboratory was operational as of 8-29-85, and no samples from Flagstaff or Thoreau were received during September. As a result, the analysis from Leupp has been included in this report only, subsequent reports will again conform to previous format as submitted by the former owners of Transwestern Pipeline Co.

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12/7/81)

Period: April 1, 1985 - September 30, 1985

Location	Station Name	Date Nu	mber Results (PPM)*	Comments
(Distribution supply location on	a section of the system which is not	contaminated)		
Hemphill County, Texas	Cities Service - Canadian	9-11-85	None Detected	. •
(Point on cantaminated portion o	f the system where gas is supplied to	another transmissi	ion company)	
Needles, Arizona	Pacific Lighting	9-19-85	165	
(Collection point within contami	nated portion of system where large ve	olumes of condensat	e are normally found)	
Leupp, Arizona ₁	Compressor Sta. #3	9-19-85	563	l Sta. #2 is the normal point
Thoreau, New Mexico	Compressor Sta. #5		See Note 1	reported, due to technical problems with the outside lab
Mountainaire, New Mexico	Compressor Sta. #7	9-19-85	193	used from June thru August, results from Sta. #2 and Sta.#5 are not valid.
(Locations downstream and upstre	am of filter/seperator at Station #1 -	- Seligman, Arizona)	
Upstream	Compressor Sta. #3	9-19-85	563	·
Downstream	Pacific Lighting - Needles, AZ.	9-19-85	165	

^{*} Analysis - Transwestern Pipeline Co. Analytical Laboratory Analytical Aroclor 1242, 1248, 1254

CONDENSATE COLLECTION REPORT

(Reference EPA Letter 12-7-81)

Date Of Report April 28, 1986				Reporting Period October 1, 1985 - March 31, 1986		
Location	Date Of Collection	Volume Collected	PCB Concentration	Date Of Last Sample	Liquid Stored At	Liquid Disposed Of By
Cities Service - Canadian	3-31-86	2,969 gal.	LT 1	12-18-85	Canadian, TX	UPG/Falco:
Pacific Lighting - Needles	3-31-86	253 gal.	158	2 -6 -86	Needles, AZ	SCA - Chicago, IL
Flagstaff Compressor Sta.	3-31-86	2,925 gal.	303	3-5-86	Flagstaff, AZ	SCA - Chicago, IL
Thoreau Compressor Sta.	3-31-86	4,318 gal.	390	2-27-86	Thoreau, NM	SCA - Chicago, IL
Mountainaire Compressor Sta.	3-31-86	11,925 gal.	61	2-13-86	Mountainaire, NM	SCA - Chicago, IL
	•					

Total liquids containing 50 to 500 ppm removed from the system 18,632 gallons.

Total liquids containing over 500 ppm removed from the system 3,758 gallons.

2095

TRANSWESTERN PIPELINE COMPANY

MONITORING CONDENSATE SAMPLING RESULTS

(Reference EPA Letter 12-7-81)

Period: October 1, 1986 - March 31, 1986

Location	Station Name	Date	Results PPM	Blank Results	Comments	
(Distribution supply location on Hemhill County, Texas	a section of the system which is Canadian - Cities Service	not contaminated	I) LT 1.0	none detected		
(Point on the system where gas is Needles, Arizona	supplied to another company from Pacific Lighting	m contaminated pi 2-6-86	peline) 158	none detected		
(Collection point within the cont Flagstaff, Arizona	aminated part of the system where Station #2	e larve volumes o 3-5-86	of condensate a normal	ly found) none detected		
Thoreau, New Mexico	Station #5	2-27-86	390	none detected		
Mountainaire, New Mexico	Station #7	2-13-86	61	none detected		
(Location downstream and uptream from the PCB scrubber at Station #1 - Siligman, AZ)						
Upstream	Station #1 Inlet	1~7-86	358	none detected		
Douwnstream	Pac. Lighting - Needles, AZ	2-6-86	158	none decteced		

Analysis - Transwestern Pipeline Co. Analystical Laboratory Analytical Aroclor 1242, 1248, 1254

GAS SAMPLING RESULTS

(Reference EPA Letter 12-7-81)

Period: October 1, 1985 - March 31, 1986

SAMPLING LOCATION

Pacific Lighting

DATE OF SAMPLE

1-23-86

SAMPLE NUMBER

N/A

SAMPLE VOLUME

50 Liters

ANALYTICAL RESULT

None Detected

LIMIT OF DETECTION

2.0 µg/M³

BLANK RESULT

None Detected

Associated Condensate Sample Results

158 ррш

GAS SAMPLING RESULTS

(Reference EPA Letter 12-7-81)

Period: April 1, 1986 - September 30, 1986

SAMPLING LOCATION

Pacific Lighting

DATE OF SAMPLE

6-23-86

SAMPLE VOLUME

50 Liters

ANALYTICAL RESULT

None Detected

LIMIT OF DETECTION

2.0 micrograms/cubic meter

BLANK RESULT

None Detected

Associated Condensate

Sample Results

114 ppm

TRANSWESTERN PIPELINE COMPANY CONDENSATE MONITORING SAMPLING RESULTS (Reference EPA letter 12-7-81)

Period: April 1, 1986 - September 30, 1986

Location	Station Name	Date	Results (PPM)	Blank Results	Comments	
(Distribution supply location of Hemphill County, Texas	n a section of the system which Canadian - Cities Service	is not contaminated) 6-12-86	LT 1.0	none detected		
(Point on the pipeline where gas Needles, Arizona	s is supplied to another company Pacific Lighting	from contaminated p 7-15-86	ipeline) 114	none detected		
(Collection point within the con Flagstaff, Arizona	ntaminated portion of the system Station #2	where large volumes 6-10-86	of condensate are normal 261	ly found) none detected		
Thoreau, New Mexico	Station #5	8-21-86	319	none detected		
Mountainaire, New Mexico	Station #7	7-07-86	67	none detected .		
(Location downstream and upstream of the PCB scrubber at Station #1 - Siligman, AZ)						
Upstream	Station #1 Inlet	8-22-86	293	none detected		
Downstream	Needles, AZ	7-12-86	114	none detected		

Analysis - Transwestern Pipeline Co. Analytical Laboratory Analyte - Aroclor 1242, 1248, 1254

Reporting Period: April 1, 1986 - September 30, 1986

TRANSWESTERN PIPELINE COMPANY

CONDENSATE COLLECTION REPORT (Reference EPA Letter 12-7-81)

Date of Report:

October 28, 1986

Date Of Volume PCB Date Of Collection Collected Concentration Last Sample Liquid Stored At Liquid Disposed Of By Location 9-30-86 1,684 gal. LT 1 6-12-86 Cities Service - Canadian Canadian, TX UPG/Falco 114 Pacific Lighting - Needles AZ 9-30-86 278 gal. 7-15-86 Needles, Az SCA - Chicago, IL 9-30-86 7,617 gal. 261 6-10-86 Flagstaff, AZ SCA - Chicago, IL Flagstaff Compressor Sta. 319 8-21-86 9-30-86 7,532 gal. Thoreau Compressor Sta. Thoreau, NM SCA - Chicago, IL 9-30-86 4,286 gal. 67 7-07-86 Mountainaire Compressor Sta. Mountainaire, NM SCA - Chicago, IL gallons. Total Liquids containing over 500 ppm removed from the system _ gallons.

Needles Measurement Station - Mohave Valley, Arizona

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
5-09	•	21	Pipeline Liquids
6-06		, 68	Pipeline Liquids
6-10		136	Pipeline Liquids
6-17		64	Pipeline Liquids
6-24	•	200	Pipeline Liquids
7-15	•	68	Pipeline Liquids
9-07		68	Piepline Liquids
9-16		225	Pipeline Liquids
11-11		230	Pipeline Liquids
12-09	•	102	Pipeline Liquids
12-16		25	Pipeline Liquids
	12-18	1,547*	Pipeline Liquids
12-23		30	Pipeline Liquids

^{*} Transportation and disposal handled by SCA Chemical Services, Chicago Illinois

Compressor Station #1 - Kingman, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
1-21	•	1,254	Pipeline Liquids
	1-21	21,063*	Pipeline Liquids
5-06	•	6,643	Pipeline Liquids
7-30		2,635	Pipeline Liquids
	12-08	12,036*	Pipeline Liquids
12-16		2,758	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #2 - Flagstaff, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
5-07		2,150	Pipeline Liquids
6-13		1,700	Pipeline Liquids
7-05		1,309	Pipeline Liquids
7-15		26	Pipeline Liquids
7-22		85	Pipeline Liquids
9-24	•	892	Pipeline Liquids
10-07		425	Pipeline Liquids
11-11 .		425	Pipeline Liquids
	12-20	14,025*	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #3 - Winslow, Arizona

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
5-16		710	Pipeline Liquids
5-20		38	Pipeline Liquids
5-30		748	Pipeline Liquids
6-03	T .	251	Pipeline Liquids
7-01		748	Pipeline Liquids
7-08		1,003	Pipeline Liquids
7-15		246	Pipeline Liquids
7-29		1,003	Pipeline Liquids
8-12		246	Pipeline Liquids
9-03		502	Pipeline Liquids
9-09		1,250	Pipeline Liquids
	12-20	7,225*	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois.

Compressor Station #4 - Sanders, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
5-09	·	251	Pipeline Liquids
5-16		123	Pipeline Liquids
5-20		128	Pipeline Liquids
5-28		123	Pipeline Liquids
6-10		123	Pipeline Liquids
6-17		123	Pipeline Liquids

Compressor Station #5 - Thoreau, New Mexico

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
5-13		990	Pipeline Liquids
5-27		493	Pipeline Liquids
5-27		497	Pipeline Liquids
6-10		497	Pipeline Liquids
6-17		990	Pipeline Liquids
6-24	,	1,488	Pipeline Liquids
7-01		497	Pipeline Liquids
7-22		497	Pipeline Liquids
8-05		493	Pipeline Liquids
8-08		497	Pipeline Liquids
8-19	·	1,980	Pipeline Liquids
9-02		501	Pipeline Liquids
10-07	•	493	Pipeline Liquids
•	11-12	20,825*	Pipeline Liquids
11-20		1,170	Used pig cups
11-20		3,192	Rags, gloves, soil
12-02		497	Pipeline Liquids
12-09		497	Pipeline Liquids
12-16		527	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois.

Compressor Station #6 - Lagunna, New Mexico

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
5-06	•	425	Pipeline Liquids
5-13		2,367	Pipeline Liquids
5-16		926	Pipeline Liquids
6-07		477	Pipeline Liquids
6-17		421	Pipeline Liquids
10-10	•	931	Pipeline Liquids
10-31		463	Pipeline Liquids
	11-15	6,949*	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #7 - Mountainaire, New Mexico

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
6-01		7,102	Pipeline Liquids
7-01		1,275	Pipeline Liquids
8-01		3,863	Pipeline Liquids
9-01		2,975	Pipeline Liquids
10-01		2,975	Pipeline Liquids
11-01	•	1,700	Pipeline Liquids
	11-05	20,162*	Pipeline Liquids
12-01		850	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Rio Grande River Crossing - Belen, New Mexico

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
2-25		1,488	Pipeline Liquids
4-08		497	Pipeline Liquids
4-15		3,965	Pipeline Liquids
4-29		11,918	Pipeline Liquids
5-28		786	Pipeline Liquids
7-29		1,441	Pipeline Liquids
8-12		3,226	Pipeline Liquids
10-18		4,713	Pipeline Liquids
	11-12	19,091*	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Needles Measurement Station - Mohave Valley, Arizona

Date	Date In	Quantity	Material	
Stored	Transport	Kilograms	Descripti	.on
2-10		14	Pipeline	
3-03		7	Pipeline	
3-10	·	7	Pipeline	
3-24		14	Pipeline	Liquids
3-31		29	Pipeline	Liquids
4-07		96	Pipeline	Liquids
4-14		110	Piepline	Liquids
4-21		57	Pipeline	
5-12		448	Pipeline	
5-19		142	Pipeline	_
5-27		21	Pipeline	
6-09		43	Pipeline	
6-23	•	21	Pipeline	
7-10		21	Pipeline	
7-21		14	Pipeline	
8-25		7	Pipeline	
9-22	·	21	Pipeline	
10-13		32	Pipeline	
10-27	•	18	Pipeline	
10-30		21	Pipeline	
11-03		14	Pipeline	
12-08		57	Pipeline	
12-00	12-18*	1294	Pipeline	
1222	12-10			
12-22		57	Pipeline	ridaras

 ^{*} Transport and disposal handled by SCA Chemical Services,
 Chicago, Illinois

Compressor Station #1 - Kingman, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
01-01		1244	Pipeline Liquids
04-07		3790	Pipeline Liquids
07-30		3356	Pipeline Liquids
10-06		1678	Pipeline Liquids
	10-07*	7971	Pipeline Liquids
12-31	•	2098	Pipeline liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #2 - Flagstaff, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
01-27		· . 89	Pipeline Liquids
02-10		36	Pipeline Liquids
03-03		231	Pipeline Liquids
03-31		92	Pipeline Liquids
04-07		71	Pipeline Liquids
04-10		10,667	Pipeline Liquids
04-11		3556	Pipeline Liquids
04-14	,	4142	Pipeline Liquids
04-15		2596	Pipeline Liquids
04-16	•	1778	Pipeline Liquids
04-18		1778	Pipeline Liquids
04-21		4338	Pipeline Liquids
04-22	•	3556	Pipeline Liquids
04-24		3556	Pipeline Liquids
04-25		3556	Pipeline Liquids
04-28		3179	Pipeline Liquids
05-09		2937	Pipeline Liquids
0.5-12		43	Pipeline Liquids
05-19		768	Pipeline Liquids
06-02		1678	Pipeline Liquids
	06-03*	16,000	Pipeline Liquids
	06-23*	24,334	Pipeline Liquids
07-07		476	Pipeline Liquids
07-21		356	Pipeline Liquids
09-08		1259	Pipeline Liquids
09-29		1678	Pipeline Liquids
10-06		12,167	Used Lube Oil
10-09		6293	Used Lube Oil
	10-13*	17,201	Pipeline Liquids
•	10-20*	17,422	Used Lube Oil
11-24	-	711	Pipeline Liquids
12-08		356	Pipeline Liquids
12-29		1600	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #3 - Winslow, Arizona

Date	Date In	Quantity	Material
Stored	Transport	Kilograms	Description
	01.00	30.557	
	01-09	10,667	Pipeline Liquids
01-13		19,509	Pipeline Liquids
	02-08	16,355	Pipeline Liquids
02-10		658	Pipeline Liquids
03-24		412	Pipeline Liquids
04-07	<u> </u>	156	Pipeline Liquids
04-21		658	Pipeline Liquids
05-05		2300	Pipeline Liquids
05-19		100	Pipeline Liquids
05-26		320	Pipeline Liquids
06-02		217	Pipeline Liquids
06-16		199	Pipeline Liquids
07-14		10,037	Pipeline Liquids
07-28		210	Pipeline Liquids
08-04	•	249	Pipeline Liquids
08-25		622	Pipeline Liquids
09-08		210	Pipeline Liquids
•••	09-23*	17,561	Pipeline Liquids
	10-07*	9600	Pipeline Liquids
10-20	10 07	1024	Pipeline Liquids
10-27			
		1255	Pipeline Liquids
11-03		836	Pipeline Liquids
12-01		192	Pipeline Liquids
12-15		644	Pipeline Liquids

Transport and disposal handled by SCA Chemical Services, Chicago, Illinois.

Compressor Station #4 - Sanders, Arizona

Date Stored	Date In Transport	Quantity Kilograms	Material Description
	01-09*	6400	Pipeline Liquids
04-28		427	Pipeline Liquids
08-18		426	Pipeline Liquids
09-15		736	Pipeline Liquids
10-13		1991	Pipeline Liquids
10-27	•	839 ·	Pipeline Liquids
11-17		107	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #5 - Thoreau, New Mexico

Stored Transport Kilograms Description 01-20 416 Pipeline Liquids 01-08 124 Work Clothing 01-20 101 Soil 01-27 888 Soil, Pig Cups 02-17 416 Pipeline Liquids 02-24 2901 Pipeline Liquids 04-07 832 Pipeline Liquids 04-28 2905 Pipeline Liquids 05-28 354 Pig Cups 06-02 2076 Pipeline Liquids
01-08 124 Work Clothing 01-20 101 Soil 01-27 888 Soil, Pig Cups 02-17 416 Pipeline Liquids 02-24 2901 Pipeline Liquids 04-07 832 Pipeline Liquids 04-28 2905 Pipeline Liquids 05-28 354 Pig Cups
01-08 124 Work Clothing 01-20 101 Soil 01-27 888 Soil, Pig Cups 02-17 416 Pipeline Liquids 02-24 2901 Pipeline Liquids 04-07 832 Pipeline Liquids 04-28 2905 Pipeline Liquids 05-28 354 Pig Cups
01-20 101 Soil 01-27 888 Soil, Pig Cups 02-17 416 Pipeline Liquids 02-24 2901 Pipeline Liquids 04-07 832 Pipeline Liquids 04-28 2905 Pipeline Liquids 05-28 354 Pig Cups
01-27888Soil, Pig Cups02-17416Pipeline Liquids02-242901Pipeline Liquids04-07832Pipeline Liquids04-282905Pipeline Liquids05-28354Pig Cups
02-17416Pipeline Liquids02-242901Pipeline Liquids04-07832Pipeline Liquids04-282905Pipeline Liquids05-28354Pig Cups
02-242901Pipeline Liquids04-07832Pipeline Liquids04-282905Pipeline Liquids05-28354Pig Cups
04-07 832 Pipeline Liquids 04-28 2905 Pipeline Liquids 05-28 354 Pig Cups
04-28 2905 Pipeline Liquids 05-28 354 Pig Cups
05-28 354 Pig Cups
06-19 416 Pipeline Liquids 06-30 481 Scrubber Filters
07-25 5806 Pipeline Liquids
07-31 1244 Pipeline Liquids
08-11 176 Soil
08-12 1367 Soil
08-15 1437 Soil, Pig Cups
08-21 3733 Pipeline Liquids
09-02 2489 Pipeline Liquids
09-08 832 Pipeline Liquids
09-22 2489 Pipeline Liquids
09-23* 8511 Soil, Pig Cups, etc.
09-23* 19,556 Pipeline Liquids
09-25 57 Pipeline Liquids
10-06 l244 Pipeline Liquids
10-13 l660 Pipeline Liquids
10-20 828 Pipeline Liquids
10-23 416 Pipeline Liquids
10-30 12.032 Pipeline Liquids
11-07* 32,000 Pipeline Liquids
12-22 1660 Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois.

Compressor Station #6 - Lagunna, New Mexico

Date Stored	Date In Transport	Quantity Kilograms	Material Description
01-02		1365	Pipeline Liquids
07-03		1458	Pipeline Liquids
08-18		1628	Pipeline Liquids

^{*} Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Compressor Station #7 - Mountainaire, New Mexico

Date Stored	Date In Transport	Quantity Kilograms	Material Description
500100	Transport	RIIOGEAMO	Description
02-01		2489	Pipeline Liquids
	02-17*	17,010	Pipeline Liquids
04-01		3733	Pipeline Liquids
05-01		1134	Pipeline Liquids
06-01	•	3431	Pipeline Liquids
	06-30*	19,200	Pipeline Liquids
10-01		2073	Pipeline Liquids
11-01		1660	Pipeline Liquids

Transport and disposal handled by SCA Chemical Services, Chicago, Illinois

Rio Grande River Crossing - Belen, New Mexico

Date Stored	Date In Transport	Quantity Kilograms	Material Description
05-12		2279	Pipeline Liquids
06-27		2073	Pipeline Liquids
07-10		626 ·	Pipeline Liquids
07-18		1451	Pipeline Liquids
07-29		1660	Pipeline Liquids
08-11		3111	Pipeline Liquids
08-20		2695	Pipeline Liquids
08-29		2283	Pipeline Liquids
10-20		4565	Pipeline Liquids
12-03		4356	Pipeline Liquids
12-18		1038	Pipeline Liquids

NOTE: No PCB liquid waste was removed from this tank during 1986 due to collapse of the bridge leading into the storage site. The bridge is owned and maintained by the local county government, and due to their budget constraints, it was not repaired until the first week of February, 1987. Two tank truck loads were subsequently hauled from this location on 2-6-87.